## U.S. Department of Housing and Urban Development Office of Public and Indian Housing

## PHA Plans

5 Year Plan for Fiscal Years 2007 - 2011 Annual Plan for Fiscal Year 2007

NOTE: THIS PHA PLANS TEMPLATE (HUD 50075) IS TO BE COMPLETED IN ACCORDANCE WITH INSTRUCTIONS LOCATED IN APPLICABLE PIH NOTICES

### PHA Plan Agency Identification

**PHA Name:** Springfield Housing Authority PHA Number: IL004 PHA Fiscal Year Beginning: 01/2007 **Public Access to Information** Information regarding any activities outlined in this plan can be obtained by contacting: (select all that apply) Main administrative office of the PHA PHA development management offices PHA local offices **Display Locations For PHA Plans and Supporting Documents** The PHA Plans (including attachments) are available for public inspection at: (select all that apply) X Main administrative office of the PHA PHA development management offices PHA local offices Main administrative office of the local government Main administrative office of the County government Main administrative office of the State government Public library PHA website Other (list below) PHA Plan Supporting Documents are available for inspection at: (select all that apply) Main business office of the PHA PHA development management offices Other (list below)

## 5-YEAR PLAN PHA FISCAL YEARS 2007 - 2011

[24 CFR Part 903.5]

<b>A</b>	TA /	•	•	
Α.	IV.	LIS	SI	on

A. I	ssion
	PHA's mission for serving the needs of low-income, very low income, and extremely low-income a the PHA's jurisdiction. (select one of the choices below)
	The mission of the PHA is the same as that of the Department of Housing and Urban Development: To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.
$\boxtimes$	The PHA's mission is: (state mission here)
affor neces	ringfield Housing Authority is the primary leader in providing quality ble housing to individuals and families, while encouraging partnerships ry for residents to develop self-sufficiency and to be productive members of munity.
The go empha identif PHAS SUCC (Quan	and objectives listed below are derived from HUD's strategic Goals and Objectives and those ed in recent legislation. PHAs may select any of these goals and objectives as their own, or ther goals and/or objectives. Whether selecting the HUDsuggested objectives or their own, RE STRONGLY ENCOURAGED TO IDENTIFY QUANTIFIABLE MEASURES OF SIN REACHING THEIR OBJECTIVES OVER THE COURSE OF THE 5 YEARS. The measures would include targets such as: numbers of families served or PHAS scores of PHAS should identify these measures in the spaces to the right of or below the stated objectives.
HUD housi	rategic Goal: Increase the availability of decent, safe, and affordable
	PHA Goal: Expand the supply of assisted housing Objectives:  Apply for additional rental vouchers: Reduce public housing vacancies: Leverage private or other public funds to create additional housing opportunities: Acquire or build units or developments Other (list below)
	PHA Goal: Improve the quality of assisted housing  Objectives:  Improve public housing management: (PHAS score) To be a high performer  Improve voucher management: (SEMAP score) To be a Section 8 high performer

	$\boxtimes$	Increase customer satisfaction: Concentrate on efforts to improve specific management functions: (list; e.g., public housing finance; voucher unit inspections)Quality of
	$\boxtimes$	maintenance service responsiveness.  Renovate or modernize public housing units: Continue to update units.  Demolish or dispose of obsolete public housing: To explore options to combat a declining occupancy rate and pursue the disposition/demolition of agad by rise buildings
		disposition/demolition of aged hi-rise buildings. Provide replacement public housing: Provide replacement vouchers: Other: (list below)
$\boxtimes$	PHA C	Goal: Increase assisted housing choices ives:
		Provide voucher mobility counseling: Conduct outreach efforts to potential voucher landlords Increase voucher payment standards Implement voucher homeownership program: Continue with and expand
		the Section 8 Homeownership Program.  Implement public housing or other homeownership programs: Continue to administer the homeownership programs at Madison Park Place (HOPE VI); North Park Place and the Major Byrd Redevelopment
		Area. Implement public housing site-based waiting lists: Convert public housing to vouchers: Other: (list below)
HUD :	Strateg	ic Goal: Improve community quality of life and economic vitality
	PHA O	Goal: Provide an improved living environment ives:  Implement measures to deconcentrate poverty by bringing higher income public housing households into lower income developments:  Implement measures to promote income mixing in publichousing and Section 8 by assuring access for lower income families into higher income developments: Madison Park Place (HOPE VI) is a mixed-income
		development. Implement public housing security improvements: Designate developments or buildings for particular resident groups (elderly, persons with disabilities) Other: (list below)

#### **HUD Strategic Goal: Promote self-sufficiency and asset development of families** and individuals $\boxtimes$ PHA Goal: Promote self-sufficiency and asset development of assisted households Objectives: $\boxtimes$ Increase the number and percentage of employed persons in assisted families: $\boxtimes$ Provide or attract supportive services to improve assistance recipients' employability: $\boxtimes$ Provide or attract supportive services to increase independence for the elderly or families with disabilities: Other: (list below) **HUD Strategic Goal: Ensure Equal Opportunity in Housing for all Americans** $\boxtimes$ PHA Goal: Ensure equal opportunity and affirmatively further fair housing Objectives: $\boxtimes$ Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion national origin, sex, familial status, and disability: $\boxtimes$ Undertake affirmative measures to provide a suitable living environment for families living in assisted housing, regardless of race, color, religion national origin, sex, familial status, and disability: $\boxtimes$ Undertake affirmative measures to ensure accessible housing to persons

#### Other PHA Goals and Objectives: (list bdow)

Other: (list below)

1. To encourage and support the youth of today toward becoming the leaders of tomorrow.

with all varieties of disabilities regardless of unit size required:

- 2. To be the best landlord in the Springfield Community.
- 3. To obtain and maintain partnerships and agreements with the various community resources.
- 4. To equip residents with the skills to become self-sufficient.
- 5. To provide quality housing.
- 6. To achieve a 97% occupancy rate.
- 7. To improve the overall image of the Springfield Housing Authority.
- 8. To establish an income stream apart from that generated by rental income.
- 9. Move towards disposition and revitalization efforts of the 4) SHA hi-rise buildings.
- 10. Move toward the consolidation of SHA administrative operations and maintenance from multiple locations to one central locationto accommodate

- the Central Office Cost Center in compliance with the HUD mandate of Asset Management.
- 11. Develop retail space in the Madison Park Place subdivision.
- 12. Develop additional affordable housing for those in need.
- 13.Transition to HUD required Asset Management and Project-Based Accounting.
- 14. Complete Major Byrd Redevelopment Area.
- 15.To meet and exceed expectations under PHAS and SEMAP.
- 16.To implement a Neighborhood Revitalization plan by acquiring properties in low income/depressed neighborhoods and either rehabilitating or new construction, to increase the availability of affordable rental and homeownership units.

### Annual PHA Plan PHA Fiscal Year 2007

[24 CFR Part 903.7]

## i. Annual Plan Type:

Select which type of Annual Plan the PHA will submit.

Standard Plan
 Streamlined Plan:

 High Performing PHA
 Small Agency (<250 Public Housing Units)</li>
 Administering Section 8 Only

 Troubled Agency Plan

#### ii. Executive Summary of the Annual PHA Plan

[24 CFR Part 903.7 9 (r)]

Provide a brief overview of the information in the Annual Plan, including highlights of major initiatives and discretionary policies the PHA has included in the Annual Plan.

### iii. Annual Plan Table of Contents

[24 CFR Part 903.7 9 (r)]

Provide a table of contents for the Annual Plan including attachments, and a list of supporting documents available for public inspection

#### **Table of Contents**

		Page #
Aı	nnual Plan	
i.	Executive Summary	
ii.	Table of Contents	
	1. Housing Needs	5
	2. Financial Resources	11
	3. Policies on Eligibility, Selection and Admissions	12
	4. Rent Determination Policies	21
	5. Operations and Management Policies	25
	6. Grievance Procedures	27
	7. Capital Improvement Needs	28
	8. Demolition and Disposition	30
	9. Designation of Housing	31
	10. Conversions of Public Housing	33
	11. Homeownership	35
	12. Community Service Programs	37
	13. Crime and Safety	41

14. Pets (Inactive for January 1 PHAs)	43
5. Civil Rights Certifications (included with PHA Plan Certifications)	43
l 6. Audit	44
17. Asset Management	44
8. Other Information:	45
Definition of Substantial Deviation and Significant Amendment or	
Modification	
Castian & Hamasymanshin Duagnam Canasity	

Section 8 Homeownership Program Capacity

Carbon Monoxide Act Compliance

Violence Against Women Act Complieance

#### **Attachments**

Indicate which attachments are provided by selecting all that apply. Provide the attachment's name (A, B, etc.) in the space to the left of the name of the attachment. Note: If the attachment is provided as a **SEPARATE** file submission from the PHA Plans file, provide the file name in parentheses in the space to the right of the title.

Required	Attac	hments:
----------	-------	---------

xcqu.	ned Attachments.
$\boxtimes$	Admissions Policy for Deconcentration
$\boxtimes$	Capital Fund Program Annual Statement
	Most recent board-approved operating budget (Required Attachment for PHAs
	that are troubled or at risk of being designated troubled ONLY)
_	
O	ptional Attachments:
$\geq$	PHA Management Organizational Chart
$\geq$	Capital Fund Program 5 Year Action Plan
	Public Housing Drug Elimination Program (PHDEP) Plan
$\geq$	Comments of Resident Advisory Board or Boards (must be attached if not
	included in PHA Plan text)
	Other (List below, providing each attachment name)

#### **Supporting Documents Available for Review**

Indicate which documents are available for public review by placing a mark in the "Applicable & On Display" column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

	List of Supporting Documents Available for Review				
Applicable & On Display	Component				
X	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans			
X	State/Local Government Certification of Consistencywith the Consolidated Plan	5 Year and Annual Plans			
X	Fair Housing Documentation: Records reflecting that the PHA has examined its programs	5 Year and Annual Plans			

List of Supporting Documents Available for Review				
Applicable & On Display	Supporting Document	Applicable Plan Component		
	or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement.			
X	Consolidated Plan for the jurisdiction/s in which the PHA is located (which includes the Analysis of Impediments to Fair Housing Choice (AI))) and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: 2007 Housing Needs		
X	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources		
X	Public Housing Admissions and (Continued) Occupancy Policy (A&O), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies		
X	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies		
X	Public Housing Deconcentration and Income Mixing Documentation:  1. PHA board certifications of compliance with deconcentration requirements (section 16(a) of the US Housing Act of 1937, as implemented in the 2/1899 Quality Housing and Work Responsibility Act Initial Guidance; Notice and any further HUD guidance) and 2. Documentation of the required deconcentration and income mixing analysis	Annual Plan: Eligibility, Selection, and Admissions Policies		
X	Public housing rent determination policies, including the methodology for setting public housing flat rents  \( \sum \) check here if included in the public housing A & O Policy	Annual Plan: Rent Determination		
X	Schedule of flat rents offered at each public housing development  Check here if included in the public housing A & O Policy	Annual Plan: Rent Determination		
X	Section 8 rent determination (payment standard) policies    check here if included in Section 8   Administrative Plan	Annual Plan: Rent Determination		
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance		
X	Public housing grievance procedures  check here if included in the public housing  A & O Policy	Annual Plan: Grievance Procedures		
X	Section 8 informal review and hearing procedures	Annual Plan: Grievance		

	List of Supporting Documents Available for	
Applicable & On Display	Supporting Document	Applicable Plan Component
	check here if included in Section 8 Administrative Plan	Procedures
X	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for the active grant year	Annual Plan: Capital Needs
N/A	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grant	Annual Plan: Capital Needs
X	Most recent, approved 5 Year Action Plan for the Capital Fund/Comprehensive Grant Program, if not included as an attachment (provided at PHA option)	Annual Plan: Capital Needs
X	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans or any other approved proposal for development of public housing	Annual Plan: Capital Needs
X	Approved or submitted applications for demolition and/or disposition of public housing (1629 E. Glenn)	Annual Plan: Demolition and Disposition
X	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
N/A	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act	Annual Plan: Conversion of Public Housing
X	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
X	Policies governing any Section 8 Homeownership program  check here if included in the Section 8  Administrative Plan	Annual Plan: Homeownership
X	Any cooperative agreement between the PHA and the TANF agency	Annual Plan: Community Service & Self-Sufficiency
X	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
X	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
X	The most recent Public Housing Drug Elimination Program (PHEDEP) semi-annual performance report for any open grant and most recently submitted PHDEP application (PHDEP Plan)	Annual Plan: Safety and Crime Prevention
X	The most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U. S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
X	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
N/A	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

#### 1. Statement of Housing Needs

[24 CFR Part 903.7 9 (a)]

#### A. Housing Needs of Families in the Jurisdiction/s Served by the PHA

Based upon the information contained in the Consolidated Plan/s applicable to the jurisdiction, and/or other data available to the PHA, provide a statement of the housing needs in the jurisdiction by completing the following table. In the "Overall" Needs column, provide the estimated number of reter families that have housing needs. For the remaining characteristics, rate the impact of that factor on the housing needs for each family type, from 1 to 5, with 1 being "no impact" and 5 being "severe impact." Use N/A to indicate that no information is available upon which the PHA can make this assessment.

Housing Needs of Families in the Jurisdiction							
	by Family Type						
Family Type	Overall	Afford- ability	Supply	Quality	Access- ibility	Size	Loca- tion
Income <= 30% of AMI	4,289	4	3	3	1	1	4
Income >30% but <=50% of AMI	3,429	4	3	3	1	1	4
Income >50% but <80% of AMI	N/A	3	2	3	1	1	3
Elderly	N/A	4	2	3	1	1	3
Families with Disabilities	N/A	3	2	3	3	3	2
Caucasian	N/A						
African/American	N/A						
Latino	N/A						
Asian/PI	N/A						

What sources of information did the PHA use to conduct this analysis? (Check all that apply; all materials must be made available for public inspection.)

$\boxtimes$	Consolidated Plan of the Jurisdiction/s
	Indicate year: 2005-2009
$\boxtimes$	U.S. Census data: the Comprehensive Housing Affordability Strategy
	("CHAS") dataset: Integrated into Consolidated Plan
	American Housing Survey data
	Indicate year:
	Other housing market study
	Indicate year:
	Other sources: (list and indicate year of information)

## B. Housing Needs of Families on the Public Housing and Section 8 Tenant- Based Assistance Waiting Lists

State the housing needs of the families on the PHA's waiting list/s. Complete one table for each type of PHA-wide waiting list administered by the PHA. PHAs may provide separate tables for site-based or sub-jurisdictional public housing waiting lists at their option.

Housing Needs of Families on the Waiting List			
Waiting list type: (select one)  ☐ Section 8 tenant-based assistance ☐ Public Housing ☐ Combined Section 8 and Public Housing ☐ Public Housing Site-Based or sub-jurisdictional waiting list (optional) ☐ If used, identify which development/subjurisdiction:			
	# of families	% of total families	Annual Turnover
Waiting list total Extremely low income <=30% AMI	518+	.01%	
Very low income (>30% but <=50% AMI)	67	0.12%	
Low income (>50% but <80% AMI)	436	0.84%	
Families with children	511		
Elderly families			
Families with Disabilities	7		
White	297	24.92%	
Black	891	74.75%	
Hispanic			
Other			
Characteristics by Bedroom Size (Public Housing Only)	220		
1BR	238		
2 BR	508		
3 BR	372		

Housing Needs of Families on the Waiting List			
4 BR	17		
5 BR	9		
5+ BR	8		
Is the waiting list clo	sed (select one)? X	No Yes	
If yes:	·	<del>_</del>	
How long has	it been closed (# of m	onths)?	
Does the PHA	expect to reopen the	list in the PHA Plan year	r? No Yes
		ories of families onto th	e waiting list, even if
generally close	ed? No Yes		
H	lousing Needs of Fan	nilies on the Waiting L	ist
Waiting list type: (sel	ect one)		
Section 8 tenar	nt-based assistance		
Public Housing	7		
Combined Sec	tion 8 and Public Hou	sing	
Public Housing	g Site-Based or sub-jur	isdictional waiting list (	optional)
If used, identif	fy which development	/subjurisdiction:	
	# of families	% of total families	Annual Turnover
Waiting list total	323		
Extremely low	287	88%	
income <=30% AMI			
Very low income	25	0.07%	
(>30% but <=50%			
AMI)			
Low income	11	.03%	
(>50% but <80%			
AMI)			
Families with	287	88%	
children	_	0.407	
Elderly families	5	.01%	
Families with	31	9%	
Disabilities	0.2	260/	
Caucasian	83	26%	
Black	234	72%	
Hispanic			
Other	6	1%	
	T		T
Characteristics by			
Bedroom Size			
(Public Housing			

	Н	lousing Needs of Fa	amilies on the Waiting L	ist
Only)				
1BR		91		
2 BR		126		
3 BR		73		
4 BR		22		
5 BR		11		
5+ BR				
Is the If yes:	How long has Does the PHA			
	generally close	· — · —	•	,
jurisdic choosin  (1) St Need: Strate its cur	tion and on the wa ag this strategy. crategies Shortage of a	ffordable housing to	for addressing the housing need oming YEAR, and the Agend for all digible population fordable units available	ey's reasons for
	number of pub Reduce turnov Reduce time to Seek replacem finance develor Seek replacem 8 replacement Maintain or in that will enabl Undertake me assisted by the Maintain or in	polic housing units of the vertime for vacated to renovate public housing perment the public housing resources acrease section 8 least to ensure access to ensu	public housing units outing units ag units lost to the inventor of units lost to the units lost	ory through mixed ory through section payment standards among families ne program to
	Maintain or in	crease section 8 leas ncrease owner accep	se-up rates by effectively so stance of program	creening Section 8

	Participate in the Consolidated Plan development process to ensure coordination with broader community strategies Other (list below)
	egy 2: Increase the number of affordable housing units by:
	Apply for additional section 8 units should they become available Leverage affordable housing resources in the community through the creation of mixed - finance housing Pursue housing resources other than public housing or Section 8 tenant-based assistance. Other: (list below)
Need:	Specific Family Types: Families at or below 30% of median
	egy 1: Target available assistance to families at or below 30 % of AMI all that apply
	Exceed HUD federal targeting requirements for families at or below 30% of AMI in public housing Exceed HUD federal targeting requirements for families at or below 30% of AMI in tenant-based section 8 assistance Employ admissions preferences aimed at families with economic hardships Adopt rent policies to support and encourage work Other: (list below)
Need:	Specific Family Types: Families ator below 50% of median
	egy 1: Target available assistance to families at or below 50% of AMI all that apply
	Employ admissions preferences aimed at families who are working Adopt rent policies to support and encourage work Other: (list below)
Need:	Specific Family Types: The Elderly
	egy 1: Target available assistance to the elderly:
	Seek designation of public housing for the edderly

	Apply for special-purpose vouchers targeted to the elderly, should they become available
	Other: (list below): Develop and promote additional amenities in elderly developments.  Specific Family Types: Families with Disabilities
	gy 1: Target available assistance to Families with Disabilities:
	Seek designation of public housing for families with disabilities Continue to update designations in accordance with the CFR's.  Carry out the modifications needed in public housing based on the section 504 Needs Assessment for Public Housing  Apply for special-purpose vouchers targeted to families with disabilities, should they become available: Implement the Mainstream Housing
$\boxtimes$	Opportunities for Persons with Disabilities with Grant awarded to the Springfield Housing Authority.  Affirmatively market to local non-profit agencies that assist families with disabilities  Other: (list below)  Further develop partnerships with agencies that work with disabled populations.
Need: needs	Specific Family Types: Races or ethnicities with disproportionate housing
needs Strate	gy 1: Increase awareness of PHA resources among families of races and ethnicities with disproportionate needs:
needs Strate	gy 1: Increase awareness of PHA resources among families of races and
needs Strate Select if	gy 1: Increase awareness of PHA resources among families of races and ethnicities with disproportionate needs:  applicable  Affirmatively market to races/ethnicities shown to have disproportionate housing needs
needs Strate Select if	gy 1: Increase awareness of PHA resources among families of races and ethnicities with disproportionate needs:  Sapplicable  Affirmatively market to races/ethnicities shown to have disproportionate housing needs Other: (list below)  gy 2: Conduct activities to affirmatively further fair housing

#### (2) Reasons for Selecting Strategies

Of the factors listed below, select all that influenced the PHA's selection of the strategies it will pursue:

$\boxtimes$	Funding constraints
$\boxtimes$	Staffing constraints
	Limited availability of sites for assisted housing
$\boxtimes$	Extent to which particular housing needs are met by other organizations in the
	community
$\boxtimes$	Evidence of housing needs as demonstrated in the Consolidated Plan and other
	information available to the PHA
$\boxtimes$	Influence of the housing market on PHA programs
$\boxtimes$	Community priorities regarding housing assistance
$\boxtimes$	Results of consultation with local or state government
	Results of consultation with residents and the Resident AdvisoryBoard
$\boxtimes$	Results of consultation with advocacy groups
	Other: (list below)

## 2. Statement of Financial Resources

[24 CFR Part 903.7 9 (b)]

List the financial resources that are anticipated to be available to the PHA for the support of Federal public housing and tenant-based Section 8 assistance programs administered by the PHA during the Plan year. Note: the table assumes that Federal public housing or tenant based Section 8 assistance grant funds are expended on eligible purposes; therefore, uses of these funds need not be stated. For other funds, indicate the use for those funds as one of the following categories: public housing operations, public housing capital improvements, public housing safety/security, public housingsupportive services, Section 8 tenant-based assistance, Section 8 supportive services or other.

Fina	ncial Resources:		
Planned Sources and Uses			
Sources	Planned \$	<b>Planned Uses</b>	
1. Federal Grants (FY 2003 grants)			
a) Public Housing Operating Fund	2,382,401.00		
b) Public Housing Capital Fund	1,430,000.00	Capital Improvements	
c) HOPE VI Revitalization	N/A		
d) HOPE VI Demolition	N/A		
e) Annual Contributions for Section	10,782,000.00		
8 Tenant-Based Assistance			
f) Public Housing Drug Elimination	N/A		
Program (including any Technical			
Assistance funds)			
g) Resident Opportunity and Self-	0.00		
Sufficiency Grants			
h) Community Development Block	N/A		
Grant			
i) HOME	N/A		

Financial Resources: Planned Sources and Uses			
Sources	Planned \$	Planned Uses	
Other Federal Grants (list below)			
2. Prior Year Federal Grants			
(unobligated funds only) (list			
below)			
3. Public Housing Dwelling Rental			
Income			
Excess Utilities	1,300,000.00	Public Utilities	
<b>4. Other income</b> (list below)			
Day Care Madison Park Place	33,800.00	Operations	
Day Care Johnson Park	3,700.00	Operations	
<b>4. Non-federal sources</b> (list below)			
Property Mgt.	200,000.00	Operations	
Mercy	49,750.00		
Total resources	\$16,181,651.00		

# 3. PHA Policies Governing Eligibility, Selection, and Admissions [24 CFR Part 903.7 9 (c)]

**A. Public Housing**Exemptions: PHAs that do not administer public housing are not required to complete subcomponent 3A.

#### (1) Eligibility

n does the PHA verify eligibility for admission to public housing? (select all apply)
When families are within a certain number of being offered a unit: (state number)
When families are within a certain time of being offered a unit: <b>As soon as possible.</b>
Other: (describe) When all requested information has been verified.

the site-based waiting lists (s  PHA main adminis  All PHA developm  Management office	11 •
(3) Assignment	
a. How many vacant unit choices a bottom of or are removed from  One Two Three or More	are applicants ordinarily given before they fall to the the waiting list? (select one)
b. Yes No: Is this policy c	consistent across all waiting list types?
c. If answer to b is no, list variation waiting list/s for the PHA:	ns for any other than the primary public housing
(4) Admissions Preferences	
targeting more to families at o	an to exceed the federal targeting requirements by than 40% of all new admissions to public housing or below 30% of median area income?
b. Transfer policies: In what circumstances will transfe	ers take precedence over new admissions? (list
below)  Emergencies  Overhoused  Underhoused  Medical justification  Administrative reasons det work)	termined by the PHA (e.g., to permit modernization
Resident choice: (state circ Other: (list below)	cumstances below)
housing (otl	established preferences for admission to public ner than date and time of application)? (If "no" is ip to subsection (5) Occupancy)

2. Which of the following admission preferences does the PHA plan to employ in the coming year? (select all that apply from either former Federal preferences or other preferences)
Former Federal preferences:  Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)  Victims of domestic violence  Substandard housing  Homelessness  High rent burden (rent is > 50 percent of income)
Other preferences: (select below)  Working families and those unable to work because of age or disability Veterans and veterans' families Residents who live and/or work in the jurisdiction Those enrolled currently in educational, training, or upward mobility programs Households that contribute to meeting income goals (broad range of incomes) Households that contribute to meeting income requirements (targeting) Those previously enrolled in educational, training, or upward mobility programs
<ul> <li>Victims of reprisals or hate crimes</li> <li>Other preference(s) (list below)</li> <li>3. If the PHA will employ admissions preferences, please prioritize by placing a "1" in the space that represents your first priority, a "2" in the box representing your second</li> </ul>
priority, and so on. If you give equal weight to one or more of these choices(either through an absolute hierarchy or through a point system), place the same number next to each. That means you can use "1" more than once, "2" more than once, etc.
Date and Time
Former Federal preferences: Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition) Victims of domestic violence Substandard housing Homelessness High rent burden
Other preferences (select all that apply)  Working families and those unable to work because of age or disability  Veterans and veterans' families  Residents who live and/or work in the jurisdiction  Those enrolled currently in educational, training, or upward mobility programs

Households that	at contribute to meeting income goals (broad range of incomes) at contribute to meeting income requirements (targeting) sly enrolled in educational, training, or upward mobility
programs Victims of repr	risals or hate crimes
Other preferen	ce(s) (list below)
The PHA apple Not applicable	ferences to income targeting requirements: ies preferences within income tiers : the pool of applicant families ensures that the PHA will meet ng requirements
(5) Occupancy	
about the rules of o  The PHA-resid  The PHA's Ad	Imissions and (Continued) Occupancy policy seminars or written materials
(select all that apply  At an annual re  Any time fami	idents notify the PHA of changes in family composition?  y) eexamination and lease renewal ly composition changes est for revision
(6) Deconcentration	and Income Mixing
c r	I the PHA's analysis of its family (general occupancy) levelopments to determine concentrations of poverty indicate the need for measures to promote deconcentration of poverty or ncome mixing?
	d the PHA adopt any changes to its <b>admissions policies</b> based on the results of the required analysis of the need to promote deconcentration of poverty or to assure income mixing?
Adoption of si	ras yes, what changes were adopted? (select all that apply) te based waiting lists targeted developments below:

	Employing waiting list "skipping" to achieve deconcentration of poverty or income mixing goals at targeted developments If selected, list targeted developments below:
	Employing new admission preferences at targeted developments If selected, list targeted developments below:
	Other (list policies and developments targeted below) Reduced the number of days for applicant acceptance of the unit offered from 7 days to 3 days under Board Resolution #2324 approved on July 27, 2006.
d. 🗌	Yes No: Did the PHA adopt any changes to <b>other</b> policies based on the results of the required analysis of the need for deconcentration of poverty and income mixing?
e. If the app	ne answer to d was yes, how would you describe these changes? (select all that ly)
	Additional affirmative marketing Actions to improve the marketability of certain developments Adoption or adjustment of ceiling rents for certain developments Adoption of rent incentives to encourage deconcentration of poverty and income-mixing Other (list below)
	ed on the results of the required analysis, in which developments will the PHA special efforts to attract or retain higher-income families? (select all that apply) Not applicable: results of analysis did not indicate a need for such efforts List (any applicable) developments below:  Springfield Housing Authority Family Developments, specifically Brandon Court (IL4-05)
make s	sed on the results of the required analysis, in which developments will the PHA special efforts to assure access for lower-income families? (select all that apply) Not applicable: results of analysis did not indicate a need for such efforts. List (any applicable) developments below:
Exempt Unless	ions: PHAs that do not administer section 8 are not required to complete subcomponent 3B.  otherwise specified, all questions in this section apply only to the tenantbased section 8 nee program (vouchers, and until completely merged into the voucher program,
cei mic	aus).

## (1) Eligibility a. What is the extent of screening conducted by the PHA? (select all that apply) Criminal or drug-related activity only to the extent required by law or $\boxtimes$ regulation $\boxtimes$ Criminal and drug-related activity, more extensively than required by law or regulation More general screening than criminal and drug-related activity (list factors below) Other (list below) b. Yes No: Does the PHA request criminal records from local law enforcement agencies for screening purposes? c. Yes No: Does the PHA request criminal records from State law enforcement agencies for screening purposes? d. X Yes No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC authorized source) e. Indicate what kinds of information you share with prospective landlords? (select all that apply) Criminal or drug-related activity Other (describe below) $\boxtimes$ The Springfield Housing Authority will provide the name, address and telephone number of previous landlords to prospective landlords if the information is requested. (2) Waiting List Organization ed

a.	With which of the following program waiting lists is the section 8 tenantbase assistance waiting list merged? (select all that apply)
$\bowtie$	None
	Federal public housing
	Federal moderate rehabilitation
	Federal project-based certificate program
	Other federal or local program (list below)
b.	Where may interested persons apply for admission to section 8 tenant-based assistance? (select all that apply)  PHA main administrative office
	Other (list below)

(3) Search Time
a. X Yes No: Does the PHA give extensions on standard 60-day period to search for a unit?
If yes, state circumstances below:  If an applicant is unable to find suitable housing within the standard 60day period, an extension may be granted. Medical reasons may also substantiate an extension to the standard 60-day search period.
(4) Admissions Preferences
a. Income targeting
Yes No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 75% of all new admissions to the section 8 program to families at or below 30% of median area income?
b. Preferences  1. Yes No: Has the PHA established preferences for admission to section 8 tenant-based assistance? (other than date and time of application) (if no, skip to subcomponent(5) Special purpose section 8 assistance programs)
2. Which of the following admission preferences does the PHA plan to employ in the coming year? (select all that apply from either former Federal preferences or other preferences)
Former Federal preferences  Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)  Victims of domestic violence Substandard housing Homelessness High rent burden (rent is > 50 percent of income)
Other preferences (select all that apply)  Working families and those unable to work because of age or disability  Veterans and veterans' families  Residents who live and/or work in your jurisdiction  Those enrolled currently in educational, training, or upward mobility programs  Households that contribute to meeting income goals (broad range of incomes)  Households that contribute to meeting income requirements (targeting)  Those previously enrolled in educational, training, or upward mobility programs  Viotime of reprisels or beta primes
Victims of reprisals or hate crimes

Other preference(s) (list below)
3. If the PHA will employ admissions preferences, please prioritize by placing a "1" in the space that represents your first priority, a "2" in the box representing your second priority, and so on. If you give equal weight to one or more of these choices (either through an absolute hierarchy or through a point system), place the same number next to each. That means you can use "1" more han once, "2" more than once, etc.
Date and Time
Former Federal preferences Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition) Victims of domestic violence Substandard housing Homelessness High rent burden
Other preferences (select all that apply)  Working families and those unable to work because of age or disability Veterans and veterans' families Residents who live and/or work in your jurisdiction Those enrolled currently in educational, training, or upward mobility programs Households that contribute to meeting income goals (broad range of incomes) Households that contribute to meeting income requirements (targeting) Those previously enrolled in educational, training, or upward mobility programs Victims of reprisals or hate crimes Other preference(s) (list below)
<ul> <li>4. Among applicants on the waiting list with equal preference status, how are applicants selected? (select one)</li> <li>Date and time of application</li> <li>Drawing (lottery) or other random choice technique</li> </ul>
<ul> <li>5. If the PHA plans to employ preferences for "residents who live and/or work in the jurisdiction" (select one)</li> <li>This preference has previously been reviewed and approved by HUD</li> <li>The PHA requests approval for this preference through this PHA Plan</li> </ul>

<ul> <li>6. Relationship of preferences to income targeting requirements: (select one)</li> <li>The PHA applies preferences within income tiers</li> <li>Not applicable: the pool of applicant families ensures that the PHA will meet</li> </ul>	
income targeting requirements	
(5) Special Purpose Section 8 Assistance Programs	
<ul> <li>a. In which documents or other reference materials are the policies governing eligibility, selection, and admissions to any special-purpose section 8 program administered by the PHA contained? (select all that apply)</li> <li>The Section 8 Administrative Plan</li> <li>Briefing sessions and written materials</li> <li>Other (list below)</li> </ul>	
<ul> <li>b. How does the PHA announce the availability of any special-purpose section 8 programs to the public?</li> <li>Through published notices</li> <li>Other (list below)</li> </ul>	
Through informational materials disseminated from the Springfield Housing Authority Administrative Office.	
4. PHA Rent Determination Policies [24 CFR Part 903.7 9 (d)]	
A. Public Housing	
Exemptions: PHAs that do not administer public housing are not required to complete subcomponent 4A.	
(1) Income Based Rent Policies	
Describe the PHA's income based rent setting policy/ies for public housing using, including discretionary (that is, not required by statute or regulation) income disregards and exclusions, in the appropriate spaces below.	
a. Use of discretionary policies: (select one)	
The PHA will not employ any discretionary rentsetting policies for income based rent in public housing. Income-based rents are set at the higher of 30% of adjusted monthly income, 10% of unadjusted monthly income, the welfare rent, or minimum rent (less HUD mandatory deductions and exclusions). (If selected, skip to sub-component (2))	
Or	

	The PHA employs discretionary policies for determining incomebased rent (If selected, continue to question b.)
b. Mir	nimum Rent
1. Wha	at amount best reflects the PHA's minimum rent? (select one) \$0 \$1-\$25 \$26-\$50
2.	Yes No: Has the PHA adopted any discretionary minimum rent hardship exemption policies?
3. If ye	es to question 2, list these policies below:
c. Re	nts set at less than 30% than adjusted income
1.	Yes No: Does the PHA plan to charge rents at a fixed amount or percentage less than 30% of adjusted income?
under v Sei	ss to above, list the amounts or percentages charged and the circumstances which these will be used below: nior developments have a ceiling/flat rent of \$325.00. developments have set ceiling rents based on the FMR's.
	ich of the discretionary (optional) deductions and/or exclusions policies does the A plan to employ (select all that apply)  For the earned income of a previously unemployed household member  For increases in earned income  Fixed amount (other than general rent-setting policy)  If yes, state amount/s and circumstances below:
	Fixed percentage (other than general rent-setting policy) If yes, state percentage/s and circumstances below:
	For household heads For other family members For transportation expenses For the non-reimbursed medical expenses of non-disabled or non-elderly families Other (describe below)

e. (	Ceiling rents
1.	Do you have ceiling rents? (rents set at a level lower than 30% of adjusted income) (select one)
	Yes for all developments Yes but only for some developments No
2.	For which kinds of developments are ceiling rents in place? (select all that apply)
	For all developments For all general occupancy developments (not elderly or disabled or elderly only) For specified general occupancy developments For certain parts of developments; e.g., the high-rise portion For certain size units; e.g., larger bedroom sizes Other (list below)
3.	Select the space or spaces that best describe how you arrive at ceiling rents (select all that apply)
	Market comparability study Fair market rents (FMR) 95 <sup>th</sup> percentile rents 75 percent of operating costs 100 percent of operating costs for general occupancy (family) developments Operating costs plus debt service The "rental value" of the unit Other (list below)
f. 1	Rent re-determinations:
1.	Between income reexaminations, how often must tenants report changes in income or family composition to the PHA such that the changes result in an adjustment to rent? (select all that apply)  Never  At family option
$\boxtimes$	Any time the family experiences an income increase Any time a family experiences an income increase above a threshold amount or percentage: (if selected, specify threshold) \$100 per month.

	Other (List Below) <b>Anytime a family experiences an income decrease with a threshold amount of \$100.00, per month.</b>
g. 🗌	Yes No: Does the PHA plan to implement individual savings accounts for residents (ISAs) as an alternative to the required 12 month disallowance of earned income and phasing in of rent increases in the next year?
(2) F	lat Rents
	setting the market-based flat rents, what sources of information did the PHA use establish comparability? (select all that apply.)  The section 8 rent reasonableness study of comparable housing Survey of rents listed in local newspaper Survey of similar unassisted units in the neighborhood Other (list/describe below)  Fair market rents.
Exemp comple the ten vouche	ection 8 Tenant-Based Assistance tions: PHAs that do not administer Section 8 tenant-based assistance are not required to ete sub-component 4B. Unless otherwise specified, all questions in this section apply only to eant-based section 8 assistance program (vouchers, and until completely merged into the er program, certificates).  syment Standards
	be the voucher payment standards and policies.
a. Wh	at is the PHA's payment standard? (select the category that best describes your ard)  At or above 90% but below100% of FMR  100% of FMR  Above 100% but at or below 110% of FMR  Above 110% of FMR (if HUD approved; describe circumstances below)
	the payment standard is lower than FMR, why has the PHA selected this indard? (select all that apply)  FMRs are adequate to ensure success among assisted families in the PHA's segment of the FMR area  The PHA has chosen to serve additional families by lowering the payment standard  Reflects market or submarket  Other (list below)

<ul> <li>c. If the payment standard is higher than FMR, why has the PHA chosen this level?         (select all that apply)         FMRs are not adequate to ensure success among assisted families in the PHA segment of the FMR area             Reflects market or submarket             To increase housing options for families             Other (list below)         </li> </ul>	r's
<ul> <li>d. How often are payment standards reevaluated for adequacy? (select one)</li> <li>Annually</li> <li>Other (list below)</li> </ul>	
<ul> <li>e. What factors will the PHA consider in its assessment of the adequacy of its paymed standard? (select all that apply)</li> <li>Success rates of assisted families</li> <li>Rent burdens of assisted families</li> <li>Other (list below)</li> <li>Rent Reasonableness Study/Market Conditions.</li> </ul>	ent
(2) Minimum Rent	
<ul> <li>a. What amount best reflects the PHA's minimum rent? (select one)</li> <li>\$0</li> <li>\$1-\$25</li> <li>\$26-\$50</li> </ul>	
b.  Yes  No: Has the PHA adopted any discretionary minimum rent hardship exemption policies? (if yes, list below)	
5. Operations and Management [24 CFR Part 903.7 9 (e)]	
Exemptions from Component 5: High performing and small PHAs are not required to complete this section. Section 8 only PHAs must complete parts A, B, and C(2)	
A. PHA Management Structure	
Describe the PHA's management structure and organization. (select one)	
An organization chart showing the PHA's management structure and	
organization is attached.  A brief description of the management structure and organization of the PHA follows:	L

#### **B. HUD Programs Under PHA Management**

List Federal programs administered by the PHA, number of families served at the beginning of the upcoming fiscal year, and expected turnover in each. (Use "NA" to indicate that the PHA does not operate any of the programs listed below.)

<b>Program Name</b>	Units or Families	Expected
	Served at Year	Turnover
	Beginning 2007	
Public Housing	874	130
Section 8 Vouchers	1898	135
Section 8 Certificates	N/A	N/A
Section 8 Mod Rehab	N/A	N/A
Special Purpose Section 8 Certificates/Vouchers (list individually)	New construction-100 Project based-36 Family unification –20 Mainstream Vouch-75	4
Public Housing Drug Elimination Program (PHDEP)	N/A	
Other Federal Programs(list individually)	ShelterPlus-7	2

#### C. Management and Maintenance Policies

List the PHA's public housing management and maintenance policy documents, manuals and handbooks that contain the Agency's rules, standards, and policies that govern maintenance and management of public housing, including a description of any measures necessary for the prevention or eradication of pest infestation (which includes cockroach infestation) and the policiesgoverning Section 8 management.

#### (1) Public Housing Maintenance and Management: (list below)

- 1. Admissions and Continued Occupancy Policy
- 2. Housing Management and Standard Operating Procedure
- 3. Personnel Policy
- 4. Maintenance Standard Operating Procedure
- 5. Mod/Development Standard Operating Procedures
- 6. Pest Control Policy
- 7. One Strike Policy
- 8. Criminal Trespass Policy
- 9. Standard Security Procedures
- 10. Check Signing Policy

- 11. Funds Transfer Policy
- 12. Investment Guidelines
- 13. Capitalization Policy
- (1) Section 8 Management: (list below)
  - 1. Section 8 Administrative Plan
  - 2. Section 8 Standard Operating Procedures
  - 3. Section 8 Private Landlord Workshop Booklet

## **6.PHA Grievance Procedures**

[24 CFR Part 903.7 9 (f)]

Exemptions from component 6: High performing PHAs are not required to complete component 6. Section 8-Only PHAs are exempt from sub-component 6A.
A. Public Housing
1. Yes No: Has the PHA established any written grievance procedures in addition to federal requirements found at 24 CFR Part 966, Subpart B, for residents of public housing?
If yes, list additions to federal requirements below:
<ul> <li>2. Which PHA office should residents or applicants to public housing contact to initiate the PHA grievance process? (select all that apply)</li> <li>PHA main administrative office</li> <li>PHA development management offices</li> <li>Other (list below)</li> </ul>
B. Section 8 Tenant-Based Assistance  1. ☐ Yes ☐ No: Has the PHA established informal review procedures for applicant to the Section 8 tenant-based assistance program and informal hearing procedures for families assisted by the Section 8 tenant-based assistance program in addition to federal requirements found at 24 CFR 982?
If yes, list additions to federal requirements below:
<ul> <li>2. Which PHA office should applicants or assisted families contact to initiate the informal review and informal hearing processes? (select all that apply)</li> <li>PHA main administrative office</li> <li>Other (list below)</li> </ul>

<b>7.</b>	<b>Capital</b>	<b>Improvement Needs</b>

[24 CFR Part 903.7 9 (g)]

Exemptions from Component 7: Section 8 only PHAs are not required to complete this component and may skip to Component 8.

#### A. Capital Fund Activities

Exemptions from sub-component 7A: PHAs that will not participate in the Capital Fund Program may skip to component 7B. All other PHAs must complete 7A as instructed.

#### (1) Capital Fund Program Annual Statement

Using parts I, II, and III of the Annual Statement for the Capital Fund Program (CIP), identify capital activities the PHA is proposing for the upcoming year to ensure longterm physical and social viability of its public housing developments. This statement can be completed by using the CFP Annual Statement tables provided in the table library at the end of the PHA Plan template **OR**, at the PHA's option, by completing and attaching a properly updated HUD52837.

Select or	ne:
	The Capital Fund Program Annual Statement is provided as an attachment to he PHA Plan at Attachment (state name) Attachment A
-or-	
	The Capital Fund Program Annual Statement is provided below: (if selected, copy the CFP Annual Statement from the Table Library and insert here)
(2) Opt	ional 5-Year Action Plan
can be cor	are encouraged to include a 5-Year Action Plan covering capital work items. This statement impleted by using the 5 Year Action Plan table provided in the table library at the end of the template <b>OR</b> by completing and attaching a properly updated HUD52834.
a. X	res No: Is the PHA providing an optional 5-Year Action Plan for the Capital Fund? (if no, skip to sub-component 7B)
	s to question a, select one: The Capital Fund Program 5-Year Action Plan is provided as an attachment to he PHA Plan at Attachment (state name) Attachment B
c	The Capital Fund Program 5-Year Action Plan is provided below: (if selected copy the CFP optional 5 Year Action Plan from the TableLibrary and insert nere)

## **B.** HOPE VI and Public Housing Development and Replacement Activities (Non-Capital Fund)

Applicability of sub-component 7B: All PHAs administering public housing. Identify any approved HOPE VI and/or public housing development or replacement activities not described in the Capital Fund Program Annual Statement.

Yes No:	a) Has the PHA received a HOPE VI revitalization grant? (if no, skip to question c; if yes, provide responses toquestion b for each grant, copying and completing as many times as necessary)
	b) Status of HOPE VI revitalization grant (complete one set of questions for each grant)
2. i 3. i	Development name: Madison Park Place Development (project) number: IL06URD004L194 (IL4-23) Status of grant: (select the statement that best describes the current status)  Revitalization Plan under development Revitalization Plan submitted, pending approval Revitalization Plan approved Activities pursuant to an approved Revitalization Plan
☐ Yes ⊠ No:	underway  c) Does the PHA plan to apply for a HOPE VI Revitalization grant in the Plan year?  If yes, list development name/s below:
Yes No:	d) Will the PHA be engaging in any mixed-finance development activities for public housing in the Plan year?  If yes, list developments or activities below:
	Major Byrd Re Development
Yes No:	e) Will the PHA be conducting any other public housing development or replacement activities not discussed in the Capital Fund Program Annual Statement?  If yes, list developments or activities below:

## **8.** Demolition and Disposition [24 CFR Part 903.7 9 (h)] Applicability of component 8: Section 8 only PHAs are not required to complete this section. 1. **∑** Yes **□** No: Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of

1937 (42 U.S.C. 1437p)) in the plan Fiscal Year? (If "No", skip to component 9; if "yes", complete one activity description

for each development.)

2.	Activity	Description
	_	1

☐ Yes ⊠ No:	Has the PHA provided the activities description information in
	the optional Public Housing Asset Management Table? (If
	"yes", skip to component 9. If "No", complete the Activity

Description table below.)

Demolition/Disposition Activity Description		
1a. Development name: Major Byrd		
1b. Development (project) number: <b>IL 4-2</b>		
2. Activity type: Demolition Partial or Full		
Disposition		
3. Application status (select one)		
Approved 🖂		
Submitted, pending approval		
Planned application		
4. Date application approved, submitted, or planned for submission: 12-9-06		
5. Number of units affected: <b>76</b>		
6. Coverage of action (select one)		
Part of the development		
☐ Total development: Major Byrd High-Rise IL4-2		
7. Timeline for activity:		
a. Actual or projected start date of activity: 6-6-06 Abatement/Demo 8-7-06		
b. Projected end date of activity: February 19, 2007		

	D 144 /D1 44 A 414 D 144			
Demolition/Disposition Activity Description				
1a. Development name: Sankey Towers 401 and 415				
1b. Development (project) number: <b>AMP Three</b>				
2. Activity type: Demolition Partial or Full				
Disposition				
3. Application status (select one)				
Approved				
Submitted, pending approval				
Planned application 🖂				
4. Date application approved, submitted, or planned for submission: 2008				
5. Number of units a	ffected:			
6. Coverage of actio	n (select one)			
Part of the devel	opment			
Total developme	ent: Sankey Towers 401 and 415			
7. Timeline for activ	rity:			
a. Actual or p	rojected start date of activity:			
b. Projected e	and date of activity: 2010			
9 Designation of	f Public Housing for Occupancy by Elderly Families			
	-			
	ith Disabilities or Elderly Families and Families with			
<u>Disabilities</u>				
[24 CFR Part 903.7 9 (i)]				
Exemptions from Compo	onent 9; Section 8 only PHAs are not required to complete this section.			
1 🖂 👽 🗀 N	TT (1 DTIA 1 '			
1. <b>Yes I</b> No:	Has the PHA designated or applied for approval to designate or			
	does the PHA plan to apply to designate any public housing for			
	occupancy only by the elderly families or only by families with			
	disabilities, or by elderly families and families with disabilities			
	or will apply for designation for occupancy by only elderly			
	families or only families with disabilities, or by elderly families			
	and families with disabilities as provided by section 7 of the			
	U.S. Housing Act of 1937 (42 U.S.C. 1437e) in the upcoming			
	fiscal year? (If "No", skip to component 10. If "yes", complete			
	one activity description for each development, unless the PHA is			
	eligible to complete a streamlined submission; PHAs			
	completing streamlined submissions may skip to component 10.			
	The SHA has designated developments.			
2. Activity Description				
$\square$ Yes $\boxtimes$ No:	Has the PHA provided all required activity description			
	information for this component in the optional Public Housing			
	Asset Management Table? If "yes", skip to component 10. If			
	"No", complete the Activity Description table below			

Designation of Public Housing Activity Description			
1a. Development name: <b>Bonansinga</b>			
1b. Development (project) number: <b>IL4-03(1)</b>			
2. Designation type:			
Occupancy by only the elderly 🖂			
Occupancy by families with disabilities			
Occupancy by only elderly families and families with disabilities			
3. Application status (select one)			
Approved; included in the PHA's Designation Plan ⊠			
Submitted, pending approval			
Planned application			
4. Date this designation approved, submitted, or planned for submission: <b>September 24</b> ,			
2001			
5. If approved, will this designation constitute a (select one) N/A			
New Designation Plan			
Revision of a previously-approved Designation Plan?			
6. Number of units affected: <b>98</b>			
7. Coverage of action (select one)			
Part of the development			
∑ Total development			
Designation of Public Housing Activity Description			
1a. Development name: Sankey Towers Apartments			
1a. Development name: Sankey Towers Apartments 1b. Development (project) number: IL4-03(2) and IL4-06			
1a. Development name: Sankey Towers Apartments 1b. Development (project) number: IL4-03(2) and IL4-06 2. Designation type:			
1a. Development name: Sankey Towers Apartments 1b. Development (project) number: IL4-03(2) and IL4-06 2. Designation type: Occupancy by only the elderly			
1a. Development name: Sankey Towers Apartments  1b. Development (project) number: IL4-03(2) and IL4-06  2. Designation type:  Occupancy by only the elderly  Occupancy by families with disabilities			
1a. Development name: Sankey Towers Apartments 1b. Development (project) number: IL4-03(2) and IL4-06  2. Designation type:  Occupancy by only the elderly □  Occupancy by families with disabilities □  Occupancy by only elderly families and families with disabilities ⊠			
1a. Development name: Sankey Towers Apartments 1b. Development (project) number: IL4-03(2) and IL4-06  2. Designation type:  Occupancy by only the elderly □  Occupancy by families with disabilities □  Occupancy by only elderly families and families with disabilities ⊠  3. Application status (select one)			
1a. Development name: Sankey Towers Apartments 1b. Development (project) number: IL4-03(2) and IL4-06  2. Designation type:  Occupancy by only the elderly □ Occupancy by families with disabilities □ Occupancy by only elderly families and families with disabilities ⊠  3. Application status (select one) Approved; included in the PHA's Designation Plan ⊠			
1a. Development name: Sankey Towers Apartments 1b. Development (project) number: IL4-03(2) and IL4-06  2. Designation type: Occupancy by only the elderly □ Occupancy by families with disabilities □ Occupancy by only elderly families and families with disabilities □  3. Application status (select one) Approved; included in the PHA's Designation Plan □ Submitted, pending approval □			
1a. Development name: Sankey Towers Apartments 1b. Development (project) number: IL4-03(2) and IL4-06  2. Designation type:  Occupancy by only the elderly □ Occupancy by families with disabilities □ Occupancy by only elderly families and families with disabilities ⊠  3. Application status (select one) Approved; included in the PHA's Designation Plan ⊠			
1a. Development name: Sankey Towers Apartments 1b. Development (project) number: IL4-03(2) and IL4-06  2. Designation type: Occupancy by only the elderly □ Occupancy by families with disabilities □ Occupancy by only elderly families and families with disabilities □  3. Application status (select one) Approved; included in the PHA's Designation Plan □ Submitted, pending approval □ Planned application □  4. Date this designation approved, submitted, or planned for submission: September 24,			
1a. Development name: Sankey Towers Apartments 1b. Development (project) number: IL4-03(2) and IL4-06  2. Designation type: Occupancy by only the elderly □ Occupancy by families with disabilities □ Occupancy by only elderly families and families with disabilities □ 3. Application status (select one) Approved; included in the PHA's Designation Plan □ Submitted, pending approval □ Planned application □  4. Date this designation approved, submitted, or planned for submission:September 24, 2001			
1a. Development name: Sankey Towers Apartments 1b. Development (project) number: IL4-03(2) and IL4-06  2. Designation type: Occupancy by only the elderly □ Occupancy by families with disabilities □ Occupancy by only elderly families and families with disabilities □ 3. Application status (select one) Approved; included in the PHA's Designation Plan □ Submitted, pending approval □ Planned application □  4. Date this designation approved, submitted, or planned for submission:September 24, 2001  5. If approved, will this designation constitute a(select one) N/A			
1a. Development name: Sankey Towers Apartments  1b. Development (project) number: IL4-03(2) and IL4-06  2. Designation type:  Occupancy by only the elderly □ Occupancy by families with disabilities □ Occupancy by only elderly families and families with disabilities □  3. Application status (select one) Approved; included in the PHA's Designation Plan □ Submitted, pending approval □ Planned application □  4. Date this designation approved, submitted, or planned for submission:September 24, 2001  5. If approved, will this designation constitute a(select one) N/A New Designation Plan			
1a. Development name: Sankey Towers Apartments  1b. Development (project) number: IL4-03(2) and IL4-06  2. Designation type:  Occupancy by only the elderly □ Occupancy by families with disabilities □ Occupancy by only elderly families and families with disabilities □  3. Application status (select one)  Approved; included in the PHA's Designation Plan □ Submitted, pending approval □ Planned application □  4. Date this designation approved, submitted, or planned for submission:September 24, 2001  5. If approved, will this designation constitute a(select one) N/A  New Designation Plan Revision of a previously-approved Designation Plan?			
1a. Development name: Sankey Towers Apartments  1b. Development (project) number: IL4-03(2) and IL4-06  2. Designation type:  Occupancy by only the elderly □ Occupancy by families with disabilities □ Occupancy by only elderly families and families with disabilities □  3. Application status (select one) Approved; included in the PHA's Designation Plan □ Submitted, pending approval □ Planned application □  4. Date this designation approved, submitted, or planned for submission:September 24, 2001  5. If approved, will this designation constitute a(select one) N/A □ New Designation Plan □ Revision of a previously-approved Designation Plan?  6. Number of units affected: 212			
1a. Development name: Sankey Towers Apartments  1b. Development (project) number: IL4-03(2) and IL4-06  2. Designation type:  Occupancy by only the elderly □ Occupancy by families with disabilities □ Occupancy by only elderly families and families with disabilities □ 3. Application status (select one) Approved; included in the PHA's Designation Plan □ Submitted, pending approval □ Planned application □  4. Date this designation approved, submitted, or planned for submission:September 24, 2001  5. If approved, will this designation constitute a(select one) N/A □ New Designation Plan □ Revision of a previously-approved Designation Plan?  6. Number of units affected: 212  7. Coverage of action (select one)			
1a. Development name: Sankey Towers Apartments  1b. Development (project) number: IL4-03(2) and IL4-06  2. Designation type:  Occupancy by only the elderly □ Occupancy by families with disabilities □ Occupancy by only elderly families and families with disabilities □  3. Application status (select one) Approved; included in the PHA's Designation Plan □ Submitted, pending approval □ Planned application □  4. Date this designation approved, submitted, or planned for submission:September 24, 2001  5. If approved, will this designation constitute a(select one) N/A □ New Designation Plan □ Revision of a previously-approved Designation Plan?  6. Number of units affected: 212			

Designation of Public Housing Activity Description					
1a. Development name: Hildebrandt Senior Apartments					
1b. Development (proje	<u>-</u>				
2. Designation type:	,				
Occupancy by o	only the elderly				
Occupancy by families with disabilities					
Occupancy by only elderly families and families with disabilities					
3. Application status (select one)					
Approved; inclu	uded in the PHA's Designation Plan				
Submitted, pend					
Planned applica	tion 🗍				
4. Date this designation	n approved, submitted, or planned for submission:September 24,				
2001					
5. If approved, will this	s designation constitute a (select one) N/A				
New Designation P	Plan				
Revision of a previ	ously-approved Designation Plan?				
6. Number of units aff	fected: 150				
7. Coverage of action	(select one)				
Part of the develop	ment				
Total development					
NOTE: Hi-Rise des	signations are currently being reviewed for revision of				
	red designation plan. Revised plan anticipated to be				
	For review, consideration, and approval within the next				
	of feview, consideration, and approval within the flexi				
60 to 90 days.					
	Public Housing to Tenant-Based Assistance				
[24 CFR Part 903.7 9 (j)]	nt 10: Section 8 only PHAs are not required to complete this section				
Exemptions from Component 10; Section 8 only PHAs are not required to complete this section.					
A. Assessments of Reasonable Revitalization Pursuant to section 202 of the HUD FY 1996 HUD Appropriations Act					
	Have any of the PHA's developments or portions of developments been identified by HUD or the PHA as covered under section 202 of the HUD FY 1996 HUD Appropriations Act? (If "No", skip to component 11; if "yes", complete one activity description for each identified development, unless eligible to complete a streamlined submission. PHAs completing streamlined submissions may skip to component 11.)				
	Has the PHA provided all required activity description information for this component in the <b>optional</b> Public Housing				

Conversion of Public Housing Activity Description
1a. Development name:
1b. Development (project) number:
2. What is the status of the required assessment?
Assessment underway
Assessment results submitted to HUD
Assessment results approved by HUD (if marked, proceed to next
question)
Other (explain below)
3. Yes No: Is a Conversion Plan required? (If yes, go to block 4; if no, go to
block 5.)
4. Status of Conversion Plan (select the statement that best describes the current
status)
Conversion Plan in development
Conversion Plan submitted to HUD on: (DD/MM/YYYY)
Conversion Plan approved by HUDon: (DD/MM/YYYY)
Activities pursuant to HUD-approved Conversion Plan underway
5. Description of how requirements of Section 202 are being satisfied by means other
than conversion (select one)
Units addressed in a pending or approved demolition application (date
submitted or approved:
Units addressed in a pending or approved HOPE VI demolition application
(date submitted or approved: )
Units addressed in a pending or approved HOPE VI Revitalization Plan
(date submitted or approved: )
Requirements no longer applicable: vacancy rates are less than 10 percent
Requirements no longer applicable: site now has less than 300 units
Other: (describe below)
B. Reserved for Conversions pursuant to Section 22 of the U.S. Housing Act of 1937
C. Reserved for Conversions pursuant to Section 33 of the U.S. Housing Act of
1937

# 11. Homeownership Programs Administered by the PHA [24 CFR Part 903.7 9 (k)]

A. Public Housing				
Exemptions from Compo	nent 11A: Section 8 only PHAs are not required to complete 11A.			
1. ⊠ Yes □ No:	Does the PHA administer any homeownership programs administered by the PHA under an approved section 5(h) homeownership program (42 U.S.C. 1437c(h)), or an approved HOPE I program (42 U.S.C. 1437aaa) or has the PHA applied or plan to apply to administer any homeownership programs under section 5(h), the HOPE I program, or section 32 of the U.S. Housing Act of 1937 (42 U.S.C. 1437z-4). (If "No", skip to component 11B; if "yes", complete one activity description for each applicable program/plan, unless eligible to complete a streamlined submission due to <b>small PHA</b> or <b>high performing PHA</b> status. PHAs completing streamlined submissions may skip to component 11B.)			
2. Activity Description  ☐ Yes ☐ No:	Has the PHA provided all required activity description information for this component in the <b>optional</b> Public Housing Asset Management Table? (If "yes", skip to component 12. If "No", complete the Activity Description table below.)			
Public Housing Homeownership Activity Description (Complete one for each development affected)				
1a. Development name: Madison Park Place				
1b. Development (pro	oject) number: IL-06-URD-0040-1194 (IL4-24)			
2. Federal Program at HOPE IV S(h) Turnkey I Section 32				
3. Application status: (select one)				
Approved Submitted Planned a	; included in the PHA's Homeownership Plan/Program l, pending approval pplication			
4. Date Homeownership Plan/Program approved, submitted, or planned for submission:				
July 18, 2000				
5. Number of units a	affected: 44			

6. Coverage of action	on: (select one)		
Part of the development			
Total development			
	lic Housing Homeownership Activity Description (Complete one for each development affected)		
	me: North Park Place		
_	oject) number: IL-06-URD-003-1197 (IL4-25)		
2. Federal Program a	uthority:		
∑ 5(h)			
Turnkey			
<b>—</b>	2 of the USHA of 1937 (effective 10/1/99)		
3. Application status			
	d; included in the PHA's Homeownership Plan/Program		
_	d, pending approval		
	application		
	ship Plan/Program approved, submitted, or planned for submission:		
July 18, 2000	-CC4-1-E		
6. Number of units affected: 5			
6. Coverage of action: (select one)  Part of the development			
	•		
Total development			
B. Section 8 Tenant Based Assistance			
1. Yes No:	Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982 ? (If "No", skip to component 12; if "yes", describe each program using the table below (copy and complete questions for each program identified), unless the PHA is eligible to complete a streamlined submission due to high performer status. <b>High performing PHAs</b> may skip to component 12.)		
2. Program Description:			
<ul> <li>a. Size of Program</li> <li>✓ Yes ☐ No: Will the PHA limit the number of families participating in the section 8 homeownership option?</li> </ul>			

If the answ	ver to the question above was yes, which statement best describes the
number of	participants? (select one)
$\boxtimes$ 25	or fewer participants
<u> </u>	- 50 participants
<u></u>	to 100 participants
☐ mo	ore than 100 participants
	rst year of utilization 10 families will be allowed to participate if
the progra	ams success continues, participants will be added according to
interest a	nd staff consideration.
b. PHA-establish	ed eligibility criteria
	Will the PHA's program have eligibility criteria for participation in
	its Section 8 Homeownership Option program in addition to HUD
	criteria?
	If yes, list criteria below:
	1) FSS participants;
	2) Current S8 program participant of program for one year
	or longer; and
	3) All other applicants.
	c) 122 00201 upp.1002100
12. PHA Comi	munity Service and Self-sufficiency Programs
[24 CFR Part 903.7 9	
	mponent 12: High performing and small PHAs are not required to complete this 8-Only PHAs are not required to complete sub-component C.
A PHA Coordin	nation with the Welfare (TANF) Agency
71. Time Coordin	nation with the wentile (1711/1) rigency
1. Cooperative ag	preements:
_ • _ •	Has the PHA has entered into a cooperative agreement with the
	TANF Agency, to share information and/or target supportive
	services (as contemplated by section 12(d)(7) of the Housing Act
	of 1937)?
	01 1937):
	If yes, what was the date that agreement was signed?
2 Other conding	ation offerts between the DIIA and TANE agency (calcut all that
	ation efforts between the PHA and TANF agency (select all that
apply)  Client refe	arrolo
	on sharing regarding mutual clients (for rent determinations and
otherwise)	
	e the provision of specific social and self-sufficiency services and
_ ` `	to eligible families
	minister programs
	administer a HUD Welfare-to-Work voucher program
Joint admi	inistration of other demonstration program

Other (describe)
------------------

### B. Services and programs offered to residents and participants

### (1) General

a. Sel	f-Sufficiency Policies			
Which	, if any of the following discretionary policies will the PHA employ to			
enhand	ce the economic and social self-sufficiency of assisted families in the			
follow	ring areas? (select all that apply)			
	Public housing rent determination policies			
	Public housing admissions policies			
	Section 8 admissions policies			
	Preference in admission to section 8 for certain public housing families			
	Preferences for families working or engaging in training or education			
	programs for non-housing programs operated or coordinated bythe			
	PHA			
$\boxtimes$				
	participation			
$\bowtie$	Preference/eligibility for section 8 homeownership option participation			
	Other policies (list below)			
1. E.				
b. Ecc	onomic and Social self-sufficiency programs			
$\nabla \mathbf{v}$	es No: Does the PHA coordinate, promote or provide any			
	programs to enhance the economic and social self			
	sufficiency of residents? (If "yes", complete the following			
	table; if "no" skip to sub-component 2, Family Self			
	Sufficiency Programs. The position of the table may be			
	altered to facilitate its use.)			
	ancieu to facilitate its use. J			

Services and Programs				
Program Name & Description (including location, if appropriate)	Estimated Size	Allocation Method (waiting list/random selection/specific	Access (development office / PHA main office / other provider name)	Eligibility (public housing or section 8 participants or both)
		criteria/other)		boul)
Family Self-Sufficiency Program  LOCATION: Springfield Housing Authority	197	Any resident of Section 8 who wants to seek and maintain employment and	Springfield Housing Authority FSS Program-SHA main office	Section 8
200 North Eleventh Street Springfield, IL 62703		become free from welfare assistance.	FSS coordinator FSS specialists or FSS Job Development Welfare assistance	

Budgeting, credit counseling	FSS	PHA Main Office	Both
and money management	Participants &		
	Homeownership		
LOCATION:	Programs		
Springfield Housing Authority	Section 8 &		
200 North Eleventh Street	Public Housing		
Springfield, IL 62703	Lease to		
	Purchase		

### (2) Family Self Sufficiency program/s

a. Participation Description

 $\boxtimes$ 

 $\boxtimes$ 

agencies

Other: (list below)

Family Self Sufficiency (FSS) Participation				
Program	Required Number of Participants	Actual Number of 07-21-06		
	(start of FY 2006 Estimate)			
<b>Public Housing</b>	79	77		
Section 8	184	120		

b. X Yes No:	required by HUD, d	oes the most rece lans to take to ach	nimum program size nt FSS Action Plan address nieve at least the minimum ow:
C. Welfare Benefit	Reductions		
Housing Act of 19 welfare program r Adopting appropriates and t Informing res	937 (relating to the tre requirements) by: (sele- propriate changes to the train staff to carry out sidents of new policy	eatment of income ect all that apply) ne PHA's public he those policies on admission and	of section 12(d) of the U.S. changes resulting from housing rent determination reexamination addition to admission and
rooveminatio		policy at times in	ii addition to admission and

Establishing or pursuing a cooperative agreement with all appropriate TANF agencies regarding the exchange of information and coordination of services

Establishing a protocol for exchange of information with all appropriate TANF

D. Reserved for Community Service Requirement pursuant to section 12(c) of the U.S. Housing Act of 1937

### General

In order to be eligible for continued occupancy, (unless they are exempt from this requirement) each adult family member must either (1) contribute eight hours per month of community service (not including political activities) within the community in which the public housing development is located, or (2) participate in an economic self-sufficiency program.

### **Exemptions**

Adult family members of tenant families are exempt from this requirement if they qualify under one of the following:

- Family members who are 62 or older
- Family members who are blind or disabled
- Family members engaged in work activity
- Family members who are exempt from work activity under part A, Tile IV of the Social Security Act or under any State Welfare Program, including Welfareto-Work program
- Family members receiving assistance under state program funded under part A title IV of the Social Security Act or under State welfare program, including welfare-to-work and who are in compliance with the program

### **Notification of Requirement**

The Springfield Housing Authority shall identify all adult family members of the community service requirement.

The Springfield Housing Authority shall notify all such family members of the community service requirement and of the categories of individuals who are exempt from the requirement. The notification will provide the opportunity from family members to claim and explain and exempt status. The Springfield Housing Authority shall verify such claims.

The notification will advise families that their community service obligation will begin upon execution of lease containing these provisions, be the head of household. For family's paying a flat rent, the obligation begins on the date their annual re-examination would have been effective had an annual re-examination taken place. It will also advise them that failure to comply with the community service requirement will result in ineligibility for continued occupancy at the time of the subsequent annual re-examination.

### **Volunteer Opportunities**

Community Service includes performing work or duties in the public benefit that serve to improve the quality of life and/or enhance resident self-sufficiency, and/or increase the self-responsibility of the resident of the community.

An economic self-sufficiency program is one that is designed to encourage, assist, train or facilitate the economic independence of participants and their families or to provide work for participants. These programs may include programs for job training, work placement, basic skills, training, education, English proficiency, work fair, financial or household management, apprenticeship, and any program necessary to ready a participant to work (such as substance or mental health treatment).

The Springfield Housing Authority will coordinate with social services agencies, local schools, and the Human Resources Office identifying a list of volunteer community service positions.

Together with the resident advisory councils, the Springfield Housing Authority may create volunteer positions such as hall monitory, litter patrol and supervising and record keeping for volunteers.

### **The Process**

At the first annual re-examination on or after October 1, 1999, and each annual re-examination thereafter, there the Springfield Housing Authority will do the following:

- Provide a list of volunteer opportunities to the family members.
- **■** Provide information about obtaining suitable volunteer positions.
- Provide a volunteer time sheet to the family member, instructions for the time sheet require the individual to complete the form and have a supervisor date and sign for each period of work.
- Assign family members to a volunteer coordinator who will assist the family members in identifying appropriate assignments Volunteer Coordinator will track the family member's progress monthly and will meet with the family member as needed to best encourage compliance.
- Thirty (30) days before the family's next lease anniversary date, the volunteer coordinator will advise the Springfield Housing Authority whether each applicable adult family member is in the compliance with the community service requirement.

### **Notification of Non-Compliance with Community Service Requirement**

The Springfield Housing Authority will notify any family found to be in noncompliance of the following:

- The family member (s) has been determined to be in noncompliance.
- That the determination is subject to the grievance procedure; and
- That, unless the family member (s) enter into an agreement to comply, the lease will not be renewed or will be terminated;

### **Opportunity for Cure**

The Springfield Housing Authority will offer the family member (s) the opportunity to enter into an agreement prior to the anniversary of the lease. The agreement shall state that the family member (s) agrees to enter into an economic self-sufficiency program or agrees to contribute to community service for as many hours as needed to comply with the requirement over the past 12 month period. The cure shall occur over the 12-month period beginning with the date of the agreement and the resident shall at the same time stay current with that year's community service requirement. The first hours a resident earns goes towards the current commitment until the current year's commitment is complete.

The volunteer coordinator will assist the family member in identifying volunteer opportunities and will track compliance on a monthly basis. If any applicable family member does not accept the terms of the agreement, does not fulfill their obligation to participate in a economic self sufficiency program, or falls behind in their obligation under the agreement to perform community service by more that (3) hours after (3) months, the SpringfieldHousing Authority shall take action to terminate the lease.

### 13. PHA Safety and Crime Prevention Measures

[24 CFR Part 903.7 9 (m)]

Exemptions from Component 13: High performing and small PHAs not participating in PHDEP and Section 8 Only PHAs may skip to component 15. High Performing and small PHAs that are participating in PHDEP and are submitting a PHDEP Plan with this PHA Plan may skip to sub component D.

### A. Need for measures to ensure the safety of public housing residents

	escribe the need for measures to ensure the safety of public housing residents
$\Box$ (s	elect all that apply)
	High incidence of violent and/or drug-related crime in some or all of the PHA's developments
	High incidence of violent and/or drug-related crime in the areas surrounding or
	adjacent to the PHA's developments
	Residents fearful for their safety and/or the safety of their children
$\bowtie$	Observed lower-level crime, vandalism and/or graffiti
$\boxtimes$	People on waiting list unwilling to move into one or more developments due to
	perceived and/or actual levels of violent and/or drug-related crime Other (describe below)
Ш	other (describe below)
	That information or data did the PHA used to determine the needfor PHA actions o improve safety of residents (select all that apply).
U	o improve safety of residents (select all that appry).
$\boxtimes$	Safety and security survey of residents
$\boxtimes$	Analysis of crime statistics over time for crimes committed "in and around"
	public housing authority
	Analysis of cost trends over time for repair of vandalism and removal of graffiti
	Resident reports PHA employee reports
	Police reports
	Demonstrable, quantifiable success with previous or ongoing anticrime/anti
	drug programs
$\boxtimes$	Other (describe below)
	Internal reports generated by SHA Security Department.
3. W	Which developments are most affected? (list below)
	IL 4-05 Brandon Court
<b>B.</b> (	Crime and Drug Prevention activities the PHA has undertaken or plans to
unde	ertake in the next PHA fiscal year
1 T	ist the crime prevention activities the DHA has undertaken or plans to undertake
	ist the crime prevention activities the PHA has undertaken or plans to undertake: ct all that apply)
	Contracting with outside and/or resident organizations for the provision of
	crime- and/or drug-prevention activities
	Crime Prevention Through Environmental Design
	Activities targeted to at-risk youth, adults, or seniors
$\bowtie$	Volunteer Resident Patrol/Block Watchers Program
	Other (describe below)
2 1	Which developments are most affected? (list below)

### IL 4-05 Brandon Court IL 4-10 Johnson Park, Lincolnwood Estates

### C. Coordination between PHA and the police

1. Describe the coordination between the PHA and the appropriate police precincts for carrying out crime prevention measures and activities: (select all that apply)
Police involvement in development, implementation, and/or ongoing evaluation of drug-elimination plan  Police provide crime data to housing authority staff for analysis and action Police have established a physical presence on housing authority property (e.g., community policing office, officer in residence)  Police regularly testify in and otherwise support eviction cases Police regularly meet with the PHA management and residents Agreement between PHA and local law enforcement agency for provision of above-baseline law enforcement services Other activities (list below)  Which developments are most affected? (list below)  IL 4-05 Brandon Court
IL 4-10 Johnson Park, 1111 South 19 <sup>th</sup> Street Apartments, Lincolnwood Estates, Hildebrandt Hi-Rise, Sankey Hi-Rises, and Bonansinga Hi-Rise.
<b>D.</b> Additional information as required by PHDEP/PHDEP Plan PHAs eligible for FY 2000 PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.
<ul> <li>Yes ⋈ No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?</li> <li>Yes ⋈ No: Has the PHA included the PHDEP Plan for FY 2000 in this PHA Plan?</li> <li>Yes ⋈ No: This PHDEP Plan is an Attachment. (Attachment Filename:)</li> </ul>
14. RESERVED FOR PET POLICY
[24 CFR Part 903.7 9 (n)] A pet policy was implemented on 10/1/99 that allowed public housing residents to keep domestic animals 30 lbs or less with appropriate immunizations. A specific agreement and security deposit are required at the time of the lease signing.
15. Civil Rights Certifications

Civil rights certifications are included in the PHA Plan Certfications of Compliance with the PHA Plans and Related Regulations.

16. Fiscal Audit [24 CFR Part 903.7 9 (p)]
1. Yes No: Is the PHA required to have an audit conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U S.C. 1437c(h))?
(If no, skip to component 17.)  2. Yes No: Was the most recent fiscal audit submitted to HUD?
3. Yes No: Were there any findings as the result of that audit?
4. Yes No: If there were any findings, do any remain unresolved?
If yes, how many unresolved findings remain?1-Procurement File
5. Yes No: Have responses to any unresolved findings been submitted to HUD?
If not, when are they due (state below)?
17 DITA Aggat Managamant
17. PHA Asset Management [24 CFR Part 903.7 9 (q)]
Exemptions from component 17: Section 8 Only PHAs are not required to complete this component.
High performing and small PHAs are not required to complete this component.
1. Yes No: Is the PHA engaging in any activities that will contribute to the long-term asset management of its public housing stock, including how the Agency will plan for long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs that have <b>not</b> been addressed elsewhere in this PHA Plan?
2. What types of asset management activities will the PHA undertake? (select all that apply)
Not applicable
Private management
Development-based accounting
Comprehensive stock assessment Other: (list below)
3. Yes No: Has the PHA included descriptions of asset management activities in the <b>optional</b> Public Housing Asset Management Table?

# 18. Other Information [24 CFR Part 903.7 9 (r)]

A. Resid	A. Resident Advisory Board Recommendations				
1. X		the PHA receive any comments on the PHA Plan from the esident Advisory Board/s?			
Commer	attached at Atta	are: (if comments were received, the PHAMUST select one) chment (2007 PHA Plan Notes) Resident Advisory Boards			
<ul><li></li></ul>	Considered comecessary.	he PHA address those comments? (select all that apply) ments, but determined that no changes to the PHA Plan were ed portions of the PHA Plan in response to comments ow:			
	Other: (list below	v)			
B. Desc	ription of Elec	tion process for Residents on the PHA Board			
1. Y	es 🛛 No:	Does the PHA meet the exemption criteria provided section 2(b)(2) of the U.S. Housing Act of 1937? (If no, continue to question 2; if yes, skip to sub-component C.)			
2. Y	es 🛛 No:	Was the resident who serves on the PHA Board elected by the residents? (If yes, continue to question 3; if no, skip to sub-component C.) Urlonda Briggs, public housing resident, was appointed to the SHA Board of Commissioners by Mayor Tim Davlin.			
3. Descr	ription of Resid	ent Election Process			
	Candidates were	lates for place on the ballot: (select all that apply) nominated by resident and assisted family organizations d be nominated by any adult recipient of PHA assistance			

	Self-nomination: Candidates registered with the PHA and requested a place on ballot
	Other: The officers of all resident organizations comprise the Joint Officers il. This body serves as the Resident Advisory Board to the SHA. All Officers minated and elected independent from SHA staff assistance and/or advisement.
b. Eliş	Any recipient of PHA assistance Any head of household receiving PHA assistance Any adult recipient of PHA assistance Any adult member of a resident or assisted family organization
c. Elig	Other (list) gible voters: (select all that apply)
	All adult recipients of PHA assistance (public housing and section 8 tenant based assistance)
	Representatives of all PHA resident and assisted family organizations Other (list)
C. Sta	atement of Consistency with the Consolidated Phn
	n applicable Consolidated Plan, make the following statement (copy questions as many times as
1. Co	nsolidated Plan jurisdiction: Springfield Housing Authority
2. The	nsolidated Plan jurisdiction: <b>Springfield Housing Authority</b> PHA has taken the following steps to ensure consistency of thisPHA Plan with Consolidated Plan for the jurisdiction: (select all that apply)
2. The	e PHA has taken the following steps to ensure consistency of thisPHA Plan with Consolidated Plan for the jurisdiction: (select all that apply)  The PHA has based its statement of needs of families in the jurisdiction on the
2. The	PHA has taken the following steps to ensure consistency of thisPHA Plan with Consolidated Plan for the jurisdiction: (select all that apply)  The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s.  The PHA has participated in any consultation process organized and offered by
2. The	PHA has taken the following steps to ensure consistency of thisPHA Plan with Consolidated Plan for the jurisdiction: (select all that apply)  The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s.
2. The	PHA has taken the following steps to ensure consistency of thisPHA Plan with Consolidated Plan for the jurisdiction: (select all that apply)  The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s.  The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.
2. The the	PHA has taken the following steps to ensure consistency of thisPHA Plan with Consolidated Plan for the jurisdiction: (select all that apply)  The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s.  The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.  The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.  Activities to be undertaken by the PHA in the coming year are consistent with
2. The the	PHA has taken the following steps to ensure consistency of thisPHA Plan with Consolidated Plan for the jurisdiction: (select all that apply)  The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s.  The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.  The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.  Activities to be undertaken by the PHA in the coming year are consistent with the initiatives contained in the Consolidated Plan. (list below)

### D. Other Information Required by HUD

Use this section to provide any additional information requested by HUD.

# <u>Definition of Substantial Deviation and Significant Amendment or Modification Definition:</u>

Any additions of non-emergency work items not included in the current Annual Statement or 5-Year Action Plan or a change in the use of replacement reserve funds under the Capital Fund and/or

Any change with regard to demolition of any property as it has been declared unsafe or unhealthy for habitat.

### **Section 8 Homeownership Program Capacity Statement**

### **Carbon Monoxide Detector Act Compliance**

See Attachment (Carbon Monoxide Detector)

### **Violence Against Women Act**

See Attachment (Violence Against Women Act

# **Attachments** Use this section to provide any additional attachments referenced in the Plans.

### PHA Plan Table Library

# Component 7 Capital Fund Program Annual Statement Parts I, II, and II

Annual Statement Capital Fund Program (CFP) Part I: Summary

Capital Fund Grant Number	FFY of Grant Approval: (MM/YYYY)
Original Annual Statement	

Line No.	Summary by Development Account	Total Estimated Cost
1	Total Non-CGP Funds	
2	1406 Operations	
3	1408 Management Improvements	
4	1410 Administration	
5	1411 Audit	
6	1415 Liquidated Damages	
7	1430 Fees and Costs	
8	1440 Site Acquisition	
9	1450 Site Improvement	
10	1460 Dwelling Structures	
11	1465.1 Dwelling Equipment-Nonexpendable	
12	1470 Nondwelling Structures	
13	1475 Nondwelling Equipment	
14	1485 Demolition	
15	1490 Replacement Reserve	
16	1492 Moving to Work Demonstration	
17	1495.1 Relocation Costs	
18	1498 Mod Used for Development	
19	1502 Contingency	
20	<b>Amount of Annual Grant (Sum of lines 2-19)</b>	
21	Amount of line 20 Related to LBP Activities	
22	Amount of line 20 Related to Section 504 Compliance	
23	Amount of line 20 Related to Security	
24	Amount of line 20 Related to Energy Conservation Measures	

### **Annual Statement**

### **Capital Fund Program (CFP) Part II: Supporting Table**

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Total Estimated Cost

### Annual Statement Capital Fund Program (CFP) Part III: Implementation Schedule

Development Number/Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)	All Funds Expended (Quarter Ending Date)

### **Optional Table for 5-Year Action Plan for Capital Fund (Component 7)**

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHAwide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the SYear cycle, because this information is included in the Capital Fund Program Annual Statement.

Optional 5-Year Action Plan Tables				
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development	
Description of Nec Improvements	eded Physical Improvements or I	Management	Estimated Cost	Planned Start Date (HA Fiscal Year)
Tratal actions and assets	ost over next 5 years			

### **Optional Public Housing Asset Management Table**

See Technical Guidance for instructions on the use of this table, including information to be provided.

Public Housing Asset Management								
	opment ification	Activity Description						
Name, Number, and Location	Number and Type of units	Capital Fund Program Parts II and III Component 7a	Development Activities Component 7b	Demolition / disposition Component 8	Designated housing Component 9	Conversion  Component 10	Home- ownership Component 11a	Other (describe) Component 17

### **Five-Year Action Plan** Part I: Summary Comprehensive Grant Program (CGP)

### U.S. Department of Housing and Urban Development

HA Name:	Locality (City/		X Original Revision No.			
SPRINGFIELD HOUSING AUTHORITY	Springfield III	inois (Sangamon County)				
A. Development Number/Name	Work Stmt. for Year 1 FFY:20 <u>07</u>	Work Statement for Year 2 FFY: 2008	Work Statement for Year 3 FFY: 2009	Work Statement for Year 4 FFY: <u>2010</u>	Work Statement for Year 5 FFY: <u>2011</u>	
	See					
B. Physical Improvements Subtotal		637,786.00	637,786.00	637,786.00	666,986.00	
C. Management Improvements		290,828.00	290,828.00	290,828.00	290,828.00	
D. HA-Wide Nondwelling Structures and Equipment		37,200.00	8,000.00	8,000.00	8,000.00	
E. Administration		145,414.00	145,414.00	145,414.00	145,414.00	
F. Other		47,500.00	47,500.00	47,500.00	47,500.00	
G. Operations		145,414.00	145,414.00	145,414.00	145,414.00	
H. Demolition		0.00	0.00	0.00	0.00	
I. Replacement Reserve		0.00	0.00	0.00	0.00	
J. Mod Used for Development		150,000.00	150,000.00	150,000.00	150,000.00	
K. Total CGP Funds		1,454,142.00	1,454,142.00	1,454,142.00	1,454,142.00	
L. Total Non-CGP Funds						
M. Grand Total						
Signature of Public Housing Director/Office of Native American Progra X	ms Administrator a	and Date:	Signature of Public Housing Dire	ector/Office of Native American Prog	grams Administrator and Date:	

# Five-Year Action Plan Part I: Summary (Continuation) Comprehensive Grant Program (CGP)

# U.S. Department of Housing and Urban Development

Office of Public and Indian Housing

A. Development Number/Name	Work Stmt. for Year 1 FFY: 2007	Work Statement for Year 2 FFY: <u>2008,</u>	Work Statement for Year 3 FFY: <u>2009</u>	Work Statement for Year 4 FFY: <u>2010</u>	Work Statement for Year 5 FFY: <u>2011</u>
4-3a Bonansinga High Rise		70,000.00	54,993.00	54,993.00	54,993.00
4-3b & 4-6 Sankey High Rise 415 & 401		55,386.00	0	0	0
4-5 Brandon	See	80,000.00	34,993.00	34,993.00	34,993.00
4-9 Hildebrandt High Rise	Annual	0	55,000.00	55,000.00	55,000.00
4-10 1111 Apartments	Statement	29,200.00	0	0	0
Lincolnwood Est					
Johnson Park					
4-12 Scattered Sites		0	0	0	0
4-14 Scattered Sites		27,000.00	62,000.00	62,000.00	62,000.00
4-18 Scattered Sites		111,400.00	140,000.00	140,000.00	140,000.00
4-19 Scattered Sites		119,000.00	120,000.00	120,000.00	120,000.00
4-20 Scattered Sites		0	0	0	0
4-22 Scattered Sites		0	0	0	0
All Hi-Rises		150,000.00	200,000.00	200,000.00	200,000.00
200 N. 11 <sup>th</sup> St		0	0	0	0
All Developments		33,000.00	33,000.00	33,000.00	33,000.00
				Foreignile of form UID 6	

52834 summary Page 2 of 2 Facsimile of form **HUD-52834** (10/96)

## Five-Year Action Plan Part II: Supporting Pages Physical Needs Work Statement(s)

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing

Comprehensive Grant Program (CGP)	Comprehensive	<b>Grant Program</b>	(CGP)	
-----------------------------------	---------------	----------------------	-------	--

Work Statement	Work Statement for Year_ FFY: <u>2008</u>	2_		Work Statement for Year _ FFY: <u>2008</u> _	2	
For Year FFY: 2007	Development Number/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/General Description of Major Work Categories	Quantity	Estimated Costs
See Annual Statement	4-3a Bonansinga Upgrade Electrical; improve grounding system, tie electrical system into fire alarm and upgrade exhaust fans Install Floor Tile Phase II	5	\$130,000.00 70,000.00	4-20 Replace Mailboxes w/community boxes Patch and Seal coat parking lot Correct Drainage and Terracing	36 18	\$5,000.00 \$4,200.00 \$5,000.00
	4-5 Brandon  Backfill around exterior of foundation & seed  Community Center Roof Replacement	1	\$4,000.00 \$20,000.00	All Hi-Rises A/C install		\$100,000.00
	4-9 Hildebrandt Property Acquisition and Demolition Install Floor Tile	10 flrs	\$20,000.00 \$88,000.00	PHA Wide Cycle Painting Window Washing Power Washing Stoves/Refrigerators		\$10,000.00 \$10,000.00 \$30,000.00 \$8,000.00
	4-10 Lincolnwood, Johnson Park, 111 Apts.  Landscape  Back fill foundation  Seed		\$3,000.00	Re-Development of Major Byrd Complex Capital Fund Dollars will be used as part of a mixed finance project to include demolition, design and		\$130,000.00
	4-12 Scattered Sites Hot Water Heaters- Phase I Replace HVAC – Phase III Final	25 25 14	\$9,000.00 \$49,786.00	construction of new single family dwelling units on the site and off-site. Inclusive of the acquisition of property adjacent north and east to the Major Byrd property.		
	4-14 Hot Water Heaters Replace Kitchen cabinets/countertop – Phase I Thermostats	10 units 20	\$5,000.00 \$20,000.00 \$2,000.00			
	4-18 Hot Water Heaters Replace Kitchen cabinets/countertop -Phase I Replace Roofs- Phase I Parking Blocks	20 19 units 19 Units 19	\$7,000.00 \$95,000.00 \$75,000.00 \$1,500.00			
	4-19 Concrete repair/replace Replace Roofs – Phase I Parking Blocks	19 19	\$5,000.00 \$75,000.00 \$1,500.00			
	52834 supporting page		Page 1 of 4		HUD 52834	

### U.S. Department of Housing and Urban Development Office of Public and Indian Housing

### **Part II: Supporting Pages**

Physical Needs Work Statement(s)
Comprehensive Grant Program (CGP)

Work Statement	Work Statement for Year FFY: <u>2009</u>	3_		Work Statement for Year FFY: <u>2009</u>	_3	
For Year FFY: 2007	Development Number/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/General Description of Major Work Categories	Quantity	Estimated Costs
See Annual Statement	4-3a Bonansinga Install Floor Tile  4-5 Brandon Door Replacement for Storage Rooms, security, front & back exterior doors  4-10 Lincolnwood, Johnson Park Repair/Replace sidewalks & drives  4-14 Window Replacement – Phase I  4-18 Window Replacement – Phase I  Replace HVAC – Phase II  Upgrade interior light fixtures – Phase I  Replace HVAC – Phase II  Hot Water Heaters Phase II  Sankey 401 4-16 / 415 4-3b Install Floor Tile  PHA Wide  Cycle Painting Window Washing Power Washing Stoves/Refrigerators	5 1/2 Floors  235  100%  10  19 19 19 20  14 Floors in each Bldg	\$70,000.00 \$80,000.00 \$29,200.00 \$27,000.00 \$45,000.00 \$11,400.00 \$57,000.00 \$7,000.00 \$55,386.00 \$5,000.00 \$5,000.00 \$15,000.00 \$15,000.00 \$15,000.00 \$8,000.00	All Hi-Rises A/C Install Make up air system  Re-Development of Major Byrd Complex Capital Fund Dollars will be used as part of a mixed finance project to include demolition, design and construction of new single family dwelling units on the site and off-site. Inclusive of the acquisition of property adjacent north and east to the Major Byrd property.		\$100,000.00 \$50,000.00 \$150,000.00

### U.S. Department of Housing and Urban Development Office of Public and Indian Housing

### **Part II: Supporting Pages**

Physical Needs Work Statement(s)
Comprehensive Grant Program (CGP)

Work Statement	Work Statement for Year_ FFY: <u>2010</u>	4_		Work Statement for Year FFY: <u>2010</u>	_4	
For Year FFY: 2007	Development Number/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/General Description of Major Work Categories	Quantity	Estimated Costs
Statement A:  4-In  4-R  W  R  U  4-W  R  H  P  C  W  P	Assessment and Upgrade of Entry System  4-3a Bonansinga nstall Floor Tile  4-5 Brandon Foundation Repair  4-14 Replace Kitchen cabinets/counter tops – Phase II Window Replacement – Phase I Replace HVAC – Phase II Upgrade interior light fixtures – Phase II Replace HVAC – Phase II Hot Water Heaters Phase II Hot Water Heaters Phase II  PHA Wide Cycle Painting Window Washing Power Washing Stoves/Refrigerators	5 1/2 Floors 235 10 10 19 19 19 20	\$55,000.00 \$54,993.00 \$34,993.00 \$35,000.00 \$27,000.00 \$50,000.00 \$50,000.00 \$50,000.00 \$5,000.00 \$5,000.00 \$5,000.00 \$5,000.00 \$15,000.00 \$8,000.00	All Hi-Rises A/C Install Make up air system Upgrade Elevators  Re-Development of Major Byrd Complex Capital Fund Dollars will be used as part of a mixed finance project to include demolition, design and construction of new single family dwelling units on the site and off-site. Inclusive of the acquisition of property adjacent north and east to the Major Byrd property.	6	\$100,000.00 \$50,000.00 \$50,000.00 \$150,000.00

### U.S. Department of Housing and Urban Development Office of Public and Indian Housing

### **Part II: Supporting Pages**

Physical Needs Work Statement(s)
Comprehensive Grant Program (CGP)

Work Statement	Work Statement for Year FFY: 2011	r <u>5</u>	T	Work Statement for Year _ FFY:2011_	5_	1
For Year FFY: <u>2007</u>	Development Number/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/General Description of Major Work Categories	Quantity	Estimated Costs
See Annual Statement	4-3a Bonansinga Replace riser shut off valves Replace Drain Piping for Showers, lavatory and kitchen  4-5 Brandon Replace Windows and Screens  4-12 Reseal Parking Lots Hot Water Heaters – Phase II  4-14 Interior / Exterior Outlets Replace Siding and Soffits Kitchen Cabinet / Countertop replacement Phase 1  4-18 Replace HVAC – Phase I Kitchen Cabinet/Countertop Replacement Phase 1 Concrete Repair  4-19 Replace HVAC – Phase I Hot Water Heaters Phase I  All Hi-rises Reseal Parking Lots Replace Front Entrance Awning Install A/C	12 Bldgs. 31 20 20 10 units 19 19 units 4 Bldgs. 4 Bldgs. 4 Bldgs.	\$20,000.00 \$58,936.00 \$100,000.00 \$10,850.00 \$4,000.00 \$45,000.00 \$65,000.00 \$57,000.00 \$57,000.00 \$57,000.00 \$57,000.00 \$5,000.00 \$5,000.00	PHA Wide Cycle Painting Window Washing Power Washing Buildings Stoves/Refrigerators  Re-Development of Major Byrd Complex Capital Fund dollars will be used as part of a mixed finance project to include demolition, design and construction of new single family dwelling units on the site and off-site. Inclusive of the acquisition of property adjacent north and east to the Major Byrd property.		\$10,000.00 \$10,000.00 \$30,000.00 \$8,000.00 \$150,000.00
52834 support	ina	l	Pane	 	 	 acsimile form <b>HUD-528</b>

### U.S. Department of Housing and Urban Development Office of Public and Indian Housing

### **Part III: Supporting Pages** Management Needs Work Statement(s) Comprehensive Grant Program (CGP)

Work Statement	Work Statement for Yea FFY: <u>2008</u>	ar 2	·	Work Statement for Yea FFY: <u>2009</u>	ar 3	<u> </u>
For Year 1 FFY <u>2007</u>	Development Number/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/General Description of Major Work Categories	Quantity	Estimated Costs
See Annual Statement	1406 Operations Operating Budget  1408 Management Improvements Marketing Staff training and travel Maintenance Agreements Upgrade Computer Systems Security Salaries Security Benefits Total  1410 Administration FM&C Salaries FM&C Benefits Total  1411 Audit Audit  1430 Fees and Costs A/E Fees Asbestos Study Total		\$145,414.00 \$15,000.00 \$50,000.00 \$10,000.00 \$105,414.00 \$290,828.00 \$72,707.00 \$72,707.00 \$145,414.00 \$2,500.00 \$40,000.00 \$5,000.00 45,000.00	1406 Operations Operating Budget  1408 Management Improvements Marketing Staff training and travel Maintenance Agreements Upgrade Computer Systems Total  1410 Administration FM&C Salaries FM&C Benefits  1411 Audit Audit  1430 Fees and Costs A/E Fees Energy Conservation Study Total		\$145,414.00 \$15,000.00 \$50,000.00 \$5,000.00 \$10,000.00 \$105,414.00 \$290,828.00 \$72,707.00 \$72,707.00 \$145,414.00 \$2,500.00 \$40,000.00 \$5,000.00 45,000.00

### U.S. Department of Housing and Urban Development Office of Public and Indian Housing

### **Part III: Supporting Pages** Management Needs Work Statement(s) Comprehensive Grant Program (CGP)

Work Statement	Work Statement for Yea FFY: <u>2010</u>	ar 4		Work Statement for Year FFY: 2011	Work Statement for Year 5 FFY: 2011	
For Year 1 FFY <u>2007</u>	Development Number/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/General Description of Major Work Categories	Quantity	Estimated Costs
See Annual Statement	1406 Operations Operating Budget  1408 Management Improvements Marketing Staff training and travel Maintenance Agreements Upgrade Computer Systems Security Salaries Security Benefits Total  1410 Administration FM&C Salaries FM&C Benefits Total  1411 Audit Audit Audit  1430 Fees and Costs A/E Fees Energy Conservation Study Total		\$145,414.00 \$15,000.00 \$50,000.00 \$5,000.00 \$105,000.00 \$105,414.00 \$290,828.00 \$72,707.00 \$72,707.00 \$145,414.00 \$2,500.00 \$40,000.00 \$5,000.00 \$45,000.00	1406 Operations Operating Budget  1408 Management Improvements Marketing Staff training and travel Maintenance Agreements Upgrade Computer Systems Security Salaries Security Benefits Total  1410 Administration FM&C Salaries FM&C Benefits  1411 Audit Audit Audit  1430 Fees and Costs A/E Fees Energy Conservation Study Total		\$145,414.00 \$15,000.00 \$50,000.00 \$10,000.00 \$105,414.00 \$105,414.00 \$290,828.00 \$72,707.00 \$72,707.00 \$145,414.00 \$2,500.00 \$40,000.00 \$40,000.00 \$45,000.00

### **Annual Statement/Performance and Evaluation Report** Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary PHA Name: Springfield Housing Authority Grant Type and Number **Federal FY of Grant:** Capital Fund Program Grant No: IL06P004-501-02 2002 Replacement Housing Factor Grant No: Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no: X Performance and Evaluation Report for Period Ending:06/30/06 Final Performance and Evaluation Report **Summary by Development Account Total Estimated Cost Total Actual Cost Original** Revised **Obligated** Expended Total non-CFP Funds 1406 Operations 0.00 0.00 0.00 0.00 1408 Management Improvements 330,000.00 330,000.00 330,000.00 330,000.00 3 1410 Administration 165.085.00 165,085.00 165.085.00 165.085.00 5 0.00 1411 Audit 0.00 0.00 0.00 1415 Liquidated Damages 0.00 0.00 0.00 0.00 1430 Fees and Costs 114.500.00 114,500.00 114.500.00 114.500.00 1440 Site Acquisition 0.00 0.00 0.00 0.00 9 1450 Site Improvement 12,314.81 12,314.81 12,314.81 12,314.81 1460 Dwelling Structures 10 1,018,975.19 1,018,975.19 1,018,975.19 1.018,975.19 1465.1 Dwelling Equipment—Nonexpendable 11 0.00 0.00 0.00 0.00 1470 Nondwelling Structures 12 9,975.00 9,975.00 9,975.00 9,975.00 13 1475 Nondwelling Equipment 0.00 0.00 0.00 0.00 14 1485 Demolition 0.00 0.00 0.00 0.00 1490 Replacement Reserve 15 0.00 0.00 0.00 0.00 1492 Moving to Work Demonstration 16 0.00 0.00 0.00 0.00 17 1495.1 Relocation Costs 0.00 0.00 0.00 0.00 1499 Development Activities 18 0.00 0.00 0.00 0.00 19 0.00 1501 Collaterization or Debt Service 0.00 0.00 0.00 20 1502 Contingency 0.00 0.00 0.00 0.00 21 Amount of Annual Grant: (sum of lines 2–20) 1,650,850.00 1,650,850.00 1,650,850.00 1,650,850.00 22 Amount of line 21 Related to LBP Activities 0.00 0.00 0.00 0.00 23 Amount of line 21 Related to Section 504 0.00 0.00 0.00 0.00 compliance 24 Amount of line 21 Related to Security - Soft 0.00 0.00 0.00 0.00

165,085.00

165,085.00

0.00

165,085.00

165,085.00

Costs

Measures

Amount of Line 21 Related to Security- Hard Costs

Amount of line 21 Related to Energy Conservation

25

26

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part II: Supporting Pages

PHA Name:		Grant Type and M Capital Fund Prog Replacement Hou	gram Grant No: ${f I}$	<b>L06P004-501-</b> at No:	02	Federal FY of Grant: 2002			
Development Number	General Description of Major	Dev. Acct No.	Quantity	Total Estin	nated Cost	Total Ac	tual Cost	Status of Work	
Name/HA-Wide	Work Categories								
Activities					T		ı		
				Original	Revised	Funds	Funds		
						Obligated	Expended		
PHA Wide	Operations	1406		0.00	0.00	0.00	0.00	Expended	
	Total 1406	1406		0.00	0.00	0.00	0.00		
PHA Wide	Security Salaries	1408		209,527.66	209,527.66	209,527.66	209,527.66	Expended	
PHA Wide	Security Benefits	1408		65,472.34	65,472.34	65,472.34	65,472.34	Expended	
PHA Wide	Staff Training & Travel	1408		35,000.00	35,000.00	35,000.00	35,000.00	Expended.	
PHA Wide	Marketing	1408		20,000.00	20,000.00	20,000.00	20,000.00	Expended	
PHA Wide	Mircosoft Licenses	1408			0.00	0.00	0.00		
	Total 1408	1408		330,000.00	330,000.00	330,000.00	330,000.00		
PHA Wide	FM&C Salaries	1410		115,559.50	115,559.50	115,559.50	115,559.50	Expended	
PHA Wide	FM&C Benefits	1410		49,525.50	49,525.50	49,525.50	49,525.50	Expended	
	Total 1410	1410		165,085.00	165,085.00	165,085.00	165,085.00		
PHA Wide	Architectural Fees & Costs			114,500.00	114,500.00	114,500.00	114,500.00	Expended	
	Total 1430	1430		114,500.00	114,500.00	114,500.00	114,500.00		
4-12 Scattered Site	Replace Furnaces & A/C	1460	30	42,606.03	42,606.03	42,606.03	42,606.03	Expended	
4-14 Scattered Site	Replace Furnaces & A/C	1460	10	14,828.15	14,828.15	14,828.15	14,828.15	Expended	
All Scattered Sites	Replace Gas Hot Water Heaters**	1460	20	7,560.03	7,560.03	7,560.03	7,560.03	On-going	
All Hi-rises	Replace Emergency Lighting	1460	Partial	0.00	0.00	0.00	0.00	Not complete	
All H-rises	Locks for Sliding Windows	1460	100%	7,089.45	7,089.45	7,089.45	7,089.45	Expended	
	Sub Total 1460			72,083.66	72,083.66	72,083.66	72,083.66		

### **Annual Statement/Performance and Evaluation Report**

**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)** 

**Part II: Supporting Pages** 

PHA Name:		Grant Type and Number				Federal FY of Grant: 2002		
		Capital Fund F	Program Grant	No: <b>IL06P004-5</b> 0	01-02			
		Replacement I	_					
Development	General Description of Major Work	Dev. Acct	Quantity	Total Estin	nated Cost	Total Actual Cost		Status of Work
Number	Categories	No.						
Name/HA-Wide								
Activities					T		T	
				Original	Revised	Funds	Funds	
				10000	10.000.	Obligated	Expended	
4-9 Hildebrandt	Electrical Upgrades	1460		18,933.54	18,933.54	18,933.54	18,933.54	Expended
4-9 Hildebrandt	Install A/C	1460		382,027.01	382,027.01	382,027.01	382,027.01	98% Complete
4-9 Hildebrandt	Replace mechanical room doors	1460	2	1,800.00	1,800.00	1,800.00	1,800.00	Expended
4-9 Hildebrandt	Upgrade front entrance	1460	1	292,734.32	292,734.32	292,734.32	292,734.32	Complete, awaiting close- out from Contractor
Admin Bldg- 200 North 11th	Upgrade and expand Office Building-replace carpet in office, paint offices, assessment and upgrade of HVAC systems, repair section of roof, replace main entrance doors and back doors, install additional security and lighting around building	1460		250,000.00	250,000.00	250,000.00	250,000.00	Complete, awaiting close out of punch list items.
4-3a Bonansinga	Upgrade front entrance	1460	1	1,396.66	1,396.66	1,396.66	1,396.66	Flooring bids opened/accepted work to begin.
	Grand Total 1460	1460		1,018,975.19	1,018,975.19	1,018,975.19	1,018,975.19	
4-9 Hildebrandt	Upgrade landscape	1450		11,149.71	11,149.71	11,149.71	11,149.71	Expended
4-10 Johnson Pk.	Upgrade landscape	1450		1,165.10	1,165.10	1,165.10	1,165.10	Expended
	Total 1450	1450		12,314.81	12,314.81	12,314.81	12,314.81	
4-10 Johnson Pk.	Utility Sheds	1470		9,975.00	9,975.00	9,975.00	9,975.00	Expended
	Total 1470	1470		9,975.00	9,975.00	9,975.00	9,975.00	
	Contingency Fund	1502		0.00	0.00	0.00	0.00	
	GRANT TOTAL			1,650,850.00	1,650,850.00	1,650,850.00	1,650,850.00	

Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part III: Implementation Schedule

PHA Name:		Grant	Type and Nur	nber			Federal FY of Grant: 2002		
			al Fund Progra	m No: <b>IL06P004</b> ng Factor No:	-501-02				
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates		
	Original	Revised	Actual	Original	Revised	Actual			
1406 Operations	5/30/04		5/27/04	5/30/06					
1408 Management Improvements	5/30/04		5/27/04	5/30/06					
1410 Administration	5/30/04		5/27/04	5/30/06					
1430 Fees and Costs	5/30/04		5/27/04	5/30/06					
1460 Dwelling Structures	5/30/04		5/27/04	5/30/06					
1502 Contingency	5/30/04		5/27/04	5/30/06					

Amount of line 21 Related to Energy Conservation Measures

### Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary PHA Name: Springfield Housing Authority Grant Type and Number Federal FY of Grant:

PHAN	Name: Springheid Housing Authority		ant No: IL06P004502-03 (B0	ONUS)	2003
		Replacement Housing Fac			
	iginal Annual Statement $\square$ Reserve for Disasters/ Eme	_			
	formance and Evaluation Report for Period Ending: 6				
Line	Summary by Development Account	Total E	stimated Cost	Total	l Actual Cost
No.					
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	20,000.00	20,000.00	20.000.00	20,000.00
3	1408 Management Improvements	81,328.00	81,328.00	69,828.00	69,828.00
4	1410 Administration	40,665.00	40,665.00	40,665.00	40,665.00
5	1411 Audit	2,000.00	2,000.00	1,000.00	1,000.00
6	1415 Liquidated Damages	0.00	0.00	0.00	0.00
7	1430 Fees and Costs	20,000.00	20,000.00	20,000.00	20,000.00
8	1440 Site Acquisition	0.00	0.00	0.00	0.00
9	1450 Site Improvement	0.00	0.00	0.00	0.00
10	1460 Dwelling Structures	242,648.00	242,648.00	141,840.10	141,840.10
11	1465.1 Dwelling Equipment—Nonexpendable	0.00	0.00	0.00	0.00
12	1470 Nondwelling Structures	0.00	0.00	0.00	0.00
13	1475 Nondwelling Equipment	0.00	0.00	0.00	0.00
14	1485 Demolition	0.00	0.00	0.00	0.00
15	1490 Replacement Reserve	0.00	0.00	0.00	0.00
16	1492 Moving to Work Demonstration	0.00	0.00	0.00	0.00
17	1495.1 Relocation Costs	0.00	0.00	0.00	0.00
18	1499 Development Activities	0.00	0.00	0.00	0.00
19	1501 Collaterization or Debt Service	0.00	0.00	0.00	0.00
20	1502 Contingency	0.00	0.00	0.00	0.00
21	Amount of Annual Grant: (sum of lines 2–20)	406,641.00	406,641.00	293,333.10	293,333.10
22	Amount of line 21 Related to LBP Activities	0.00	0.00	0.00	0.00
23	Amount of line 21 Related to Section 504 compliance	0.00	0.00	0.00	0.00
24	Amount of line 21 Related to Security – Soft Costs	0.00	0.00	0.00	0.00
25	Amount of Line 21 Related to Security – Hard Costs	0.00	0.00	0.00	0.00
	· · · · · · · · · · · · · · · · · · ·				

0.00

0.00

0.00

Capital Fund Program and Capital<sup>2</sup>Fund Program Replacement Housing Factor (CFP/CFPRHF)

PHA Name: <b>Spri</b>	ngfield Housing Authority	Grant Type and N Capital Fund Programment House	ram Grant No: <b>IL</b>	Federal FY of Grant: 2003				
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Acct No. Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
PHA WIDE	Operations	1406		20,000.00	20,000.00	20,000.00	20,000.00	
	TOTAL 1406			20,000.00	20,000.00	20,000.00	20,000.00	
	Management Improvements	1408			·	·		
	Improve Security Systems			36,078.00	36,078.00	36,078.00	36,078.00	Expended
	Training & Travel			10,000.00	10,000.00	0.00	0.00	On-going
	Procurement Software			1,500.00	1,500.00	0.00	0.00	On-going
	Mod./Dev. Staffing:			28,750.00	28,750.00	28,750.00	28,750.00	Expended
	-Secretary							
	Records Retention			5,000.00	5,000.00	5,000.00	5,000.00	Expended
	TOTAL 1408			81,328.00	81,328.00	69,828.00	69,828.00	
	Administration							
	FM&C Salaries	1410		24,096.00	24,096.00	24,096.00	24,096.00	Expended
	FM&C Benefits	1410		16,569.00	16,569.00	16,569.00	16,569.00	Expended
	TOTAL 1460			40,665.00	40,665.00	40,665.00	40,665.00	
	Audit	1411		2,000.00	2,000.00	1,000.00	1,000.00	Awaiting closeout
	TOTAL 1411			2,000.00	2,000.00	1,000.00	1,000.00	
	Fees & Cost	1430		20,000.00	20,000.00	20,000.00	20,000.00	On-going
	TOTAL 1430			20,000.00	20,000.00	20,000.00	20,000.00	
IL 4-3a & 4-9 Dwelling Structures	Expansion of Administration Offices	1460		222,648.00	0.00	0.00	0.00	Budget Rev.
4-9 Dwelling Structures	Rehab. Front Entrance Areas			20,000.00	242,648.00	141,840.10	141,840.10	Budget Rev
	TOTAL 1460			242,648.00	242,648.00	141,840.10	141,840.10	

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

**Part III: Implementation Schedule** 

PHA Name: <b>Springfiel</b>			Replacement	Program No: <b>IL06</b> 1 Housing Factor No		Federal FY of Grant: 2003	
Development Number Name/HA-Wide Activities	Name/HA-Wide (Quarter End Activities				ll Funds Expended uarter Ending Date		Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
1406 Operations	02/12/06		02/08/06	02/12/08			
1408 Management Improvements	02/12/06		02/08/06	02/12/08			
1410 Administration	02/12/06		02/08/06	02/12/08			
1411 Audit	02/12/06		02/08/06	02/12/08			
1430 Fees & Costs	02/12/06		02/08/06	02/12/08			
1460 Dwelling Structures	02/12/06		02/08/06	02/12/08			

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary

PHA N	Name: Springfield Housing Authority Gr	rant Type and Number			Federal FY of Grant:
		apital Fund Program Grant N			2003
		eplacement Housing Factor (			
Or	iginal Annual Statement Reserve for Disasters/	Emergencies Revised A	Annual Statement (rev	vision no:	
X Per	formance and Evaluation Report for Period Endi	ng:06/30/06	erformance and Evalu	ation Report	
Line	Summary by Development Account	Total	Estimated Cost		<b>Total Actual Cost</b>
No.			1		
		Original	Revised	Obligated	Expended
_1	Total non-CFP Funds				
3	1406 Operations	128,168.00	128,168.00	0.00	0.00
	1408 Management Improvements	256,337.00	256,337.00	245,835.10	245,835.10
4	1410 Administration	128,168.00	128,168.00	128,168.00	128,168.00
5	1411 Audit	2,500.00	2,500.00	0.00	0.00
6	1415 Liquidated Damages	0.00	0.00	0.00	0.00
7	1430 Fees and Costs	110,000.00	160,000.00	160,000.00	160,000.00
8	1440 Site Acquisition	0.00	0.00	0.00	0.00
9	1450 Site Improvement	7,000.00	7,000.00	3,895.50	3,895.50
10	1460 Dwelling Structures	480,518.00	486,509.50	265,068.43	265,068.43
11	1465.1 Dwelling Equipment—Nonexpendable	53,100.00	53,100.00	53,100.00	53,100.00
12	1470 Nondwelling Structures	0.00	0.00	0.00	0.00
13	1475 Nondwelling Equipment	13,358.00	56,006.00	52,649.01	52,649.01
14	1485 Demolition	7,000.00	3,895.50	3,895.50	3,895.50
15	1490 Replacement Reserve	0.00	0.00	0.00	0.00
16	1492 Moving to Work Demonstration	0.00	0.00	0.00	0.00
17	1495.1 Relocation Costs	0.00	0.0	0.00	0.00
18	1499 Development Activities	0.00	0.00	0.00	0.00
19	1501 Collaterization or Debt Service	0.00	0.00	0.00	0.00
20	1502 Contingency	0.00	0.00	0.00	0.00
21	Amount of Annual Grant: (sum of lines 2–20)	1,281,684.00	1,281,684.00	912,611.54	912,611.54
22	Amount of line 21 Related to LBP Activities	0.00	0.00	0.00	0.00
23	Amount of line 21 Related to Section 504 complian	ice 0.00	0.00	0.00	0.00
24	Amount of line 21 Related to Security – Soft Costs	0.00	0.00	0.00	0.00
25	Amount of Line 21 Related to Security – Hard Costs	147,959.00	147,959.00	147,959.00	147,959.00
26	Amount of line 21 Related to Energy Conservation	0.00	0.00	0.00	0.00

PHA Name: Sprin	gfield Housing Authority	Grant Type and N		0/D004501 0	•	Federal FY of Grant: 2003			
		Capital Fund Prog			•				
Development Number	General Description of Major Work Categories	Dev. Acct No.	Quantity		mated Cost	Total Ac	tual Cost	Status of Work	
Name/HA-Wide Activities	Categories							WOIK	
				Original	Revised	Funds Obligated	Funds Expended		
PHA Wide	Operations	1406		128,168.00	128,168.00	0.00	0.00		
	TOTAL 1406	1406		128,168.00	128,168.00	0.00	0.00		
PHA Wide	Security Salaries	1408		97,094.00	97,094.00	97,094.00	97,094.00	Expended	
PHA Wide	Security Benefits	1408		50,865.00	50,865.00	50,865.00	50,865.00	Expended	
PHA Wide	Staff Training & Travel	1408		35,000.00	35,000.00	34,226.69	34,226.69	Expended	
PHA Wide	Computer Hardware	1408		0.00	30,252.29	30,252.29	30,252.29	Budget rev.	
PHA Wide	Computer Software	1408		35,000.00	4,747.71	4,747.71	4,747.71	Rev. to offset hardware line	
DITA W' 1	N	1400		22 270 00	22 270 00	12 640 41	12 (40 41	item	
PHA Wide	Maintenance Agreements	1408		23,378.00	23,378.00	13,649.41	13,649.41	Expended	
PHA Wide	Marketing	1408		15,000.00	15,000.00	15,000.00	15,000.00	Expended	
PHA Wide	TOTAL 1408	1408		256,337.00	256,337.00	245,835.10	245,835.10		
PHA Wide	FM&C Salaries	1410		98,967.00	98,967.00	98,967.00	98,967.00	Expended	
	FM&C Benefits	1410		29,201.00	29,201.00	29,2010.00	29,201.00	Expended	
PHA Wide	TOTAL 1410	1410		128,168.00	128,168.00	128,168.00	128,168.00		
	Audit	1411		2,500.00	2,500.00	0.00	0.00	Await grant close	
	TOTAL 1411	1411		2,500.00	2,500.00	0.00	0.00		
PHA Wide	A/E Fees	1430		40,000.00	160,000.00	160,000.00	160,000.00	Expended	
PHA Wide	Consultation Fees & Costs	1430		70,000.00	0.00	0.00	0.00	Budget rev.	
PHA Wide	TOTAL 1430	1430		110,000.00	160,000.00	160,000.00	160,000.00		
	Contingency	1502		102,535.00	0.00	0.00	0.00		
	<b>Total 1502</b>	1502		102,535.00	0.00	0.00	0.00		

PHA Name:		Grant Type a	nd Number			Federal FY of	f Grant: 2003	
		Capital Fund Replacement	Housing Fact					
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Esti	mated Cost	Total Ac	ctual Cost	Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
IL 4-10 Johnson Park, Lincolnwood, 1111 S. 19 <sup>th</sup>	Install Entrance Signs Tear down garage and install garbage enclosures	1450 1450	3 1	4,000.00 3,000.00	4,000.00 3,000.00	0.00 0.00	0.00 0.00	Need budget rev./not complete Need budget rev./not complete
	TOTAL 1450	1450		7,000.00	7,000.00	0.00	0.00	
Admin Bldg-200 North 11 <sup>th</sup>	Condensing Units: One (1) 3-ton 3 Phase One (1) 3-ton 1 Phase One (1) 2-ton 1 Phase Two (2)-5-ton 3 Phase One (1) 8-ton 3 Phase	1460 1460 1460 1460 1460 1460	6u	7,875.00	83,111.00	83,111.00	83,111.00	Complete, awaiting close out of punch list.
	Furnace 125,000 BTU w/coils	1460	2	5,250.00	513.62	513.62	513.62	Budget rev. / Complt. with condensing units.
	Reseal Entry Doors Study Installation of Central Air	1460 1460		6,000.00 63,986.00	0.00 0.00	0.00 0.00	0.00 0.00	Budget rev. /not complt. Budget rev. /Complt. with condensing units.
	200 N. Upgrade	1460		0.00	71,281.00	71,281.00	71,281.00	Complete waiting close out of punch list.
All hi-rises (4-3a,4-3b,4-9,4-6	Replace piping & pumps on boilers	1460		15,000.00	6,306.11	6,306.11	6,306.11	Budget rev. /boilers purchased, await install.
IL 4-6 Sankey 401	Repair Mechanical Room Door	1460		4,500.00	0.00	0.00	0.00	Budget rev. /not complt.
IL 4-6 Sankey 401	Replace 1 <sup>st</sup> floor windows	1460		30,000.00	0.00	0.00	0.00	Budget rev. /not complt.
IL 4-9 Hildebrandt	Replace A-coils	1460		60,000.00	60,000.00	60000.00	60,000.00	98% complt.
IL 4-9 Hildebrandt	Replace 4-ton Condensing Units	1460		30,000.00	28,680.27	28,680.27	258,680.27	98% complt.
IL 4-9 Hildebrandt	Repair Mechanic Room Door SUB TOTAL 1460	1460		9,500.00 <b>232,111.00</b>	9,500.00 <b>259,392.00</b>	8,908.54 <b>258,800.54</b>	8,908.54 <b>258,800.54</b>	Expended

PHA Name:		Grant Type and I	Number			Federal FY of	Grant: 2003	
		Capital Fund Prog	gram Grant No: <b>IL</b>	.06P004501-0	3			
		Replacement Hou	sing Factor Grant	No:				
Development	General Description of Major Work	Dev. Acct No.	Quantity	Total Estimated Cost		Total Ac	ctual Cost	Status of
Number	Categories							Work
Name/HA-Wide								
Activities					1		ı	
				Original	Revised	Funds	Funds	
						Obligated	Expended	
IL 4-2	Replace Electric panels	1460		15,000.00	0.00	0.00	0.00	Budget rev.
Major Byrd	Tuckpoint & Seal	1460	76	28,000.00	0.00	0.00	0.00	Develop.
	Install 54475	1460	1	6,394.00	0.00	0.00	0.00	Off-line.
IL 4-5	Replace exterior doors	1460	39	190,263.00	190,263.00	252.38	252.38	Need budget
Brandon Ct.								rev.
IL 4-3B	Install ¾ reservation lines	1460		8,000.00	36,104.50	6,015.51	6,015.51	On-going
Sankey 4-15	Install compressor for Quincy CAT 300715	1460	1	750.00	750.00	0.00	0.00	Not started.
	SUB TOTAL 1460			248,407.00	227,117.50	6,267.89	6,267.89	
	GRAND TOTAL 1460			480,518.00	486,509.50	265,068.43	265,068.43	
All Developments	Refrigerator/Stove Replacement	1465		53,100.00	53,100.00	53,100.00	53,100.00	Expended
-	TOTAL 1465	1465		53,100.00	53,100.00	53,100.00	53,100.00	
PHA Wide	Motorola 2-way Radios	1475	5	4,000.00	5,000.00	4,866.00	4,866.00	Expended
	Power sewer cleaning machines	1475	2-sets	1,283.00	1,283.00	1,219.00	1,219.00	Expended
	MIG Wire Welder	1475	1	3,500.00	2,500.00	554.59	554.59	Expended
	Bag less Vacuum Sweepers	1475	3	1,575.00	1,575.00	985.00	985.00	Expended
	Plan restoration/preservation	1475		3,000.00	3,000.00	3,000.00	3,000.00	Expended
	TOTAL 1475	1475		13,358.00	56,006.00	52,649.01	52,649.01	
IL 4-18 Scattered Site	Demolish 1629 E. Glenn	1485	1	7,000.00	3,895.50	3,895.50	3,895.50	Expended
	Total 1485	1485	1	7,000.00	3,895.50	3,895.50	3,895.50	
	Contingency Fund	1502		0.00	000	0.00	0.00	
	GRANT TOTAL			1,281,684.00	1,281,684.00	912,611.54	912,611.54	

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Facor (CFP/CFPRHF)
Part III: Implementation Schedule

PHA Name:		Grant	Type and Nun	nber			Federal FY of Grant: 2003
			al Fund Program	m No: <b>IL06P00</b> 4 g Factor No:	4501-03		
Development Number		Fund Obligat			ll Funds Expended		Reasons for Revised Target Dates
Name/HA-Wide	(Qua	arter Ending D	ate)	(Q	uarter Ending Date	e)	
Activities		T					
	Original	Revised	Actual	Original	Revised	Actual	
1406 Operations	9/1705		9/14/05	9/16/07			
1408 Management	9/17/05			9/16/07			
Improvements							
1410 Administration	9/17/05		9/14/05	9/16/07			
1411 Audit	9/17/05		9/14/05	9/16/07			
1430 Fees & Costs	9/17/05		9/14/05	9/16/07			
1450 Site Improvements	9/17/05		9/14/05	9/16/07			
1460 Dwelling Structures	9/17/05		9/14/05	9/16/07			
1465.1 Dwelling	9/17/05		9/14/05	9/16/07			
Equipment							
1475 Non-Dwelling	9/17/05		9/14/05	9/16/07			
Equipment							
1485 Demolition	9/17/05		9/14/05	9/16/07			
1502 Contingency	9/17/05		9/14/05	9/16/07			
		_					

#### **Annual Statement/Performance and Evaluation Report** Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary PHA Name: Springfield Housing Authority **Grant Type and Number** Federal FY of Grant: 2004 Capital Fund Program Grant No: IL06P004501-04 Replacement Housing Factor Grant No: Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no: ) X Performance and Evaluation Report for Period Ending: 06/30/06 Final Performance and Evaluation Report **Summary by Development Account Total Actual Cost** Line **Total Estimated Cost** No. **Original** Revised **Obligated Expended** Total non-CFP Funds 1406 Operations 149,980.20 149,980.20 0.00 0.00 299,960.40 299,960.40 238,181.12 1408 Management Improvements 238,181.12 1410 Administration 4 149,980.20 149,980.20 149,980.20 149,980.20 5 1411 Audit 2,000.00 2,000.00 0.00 0.00 1415 Liquidated Damages 0.00 0.00 0.00 0.00 6 7 1430 Fees and Costs 20,000.00 20,000.00 4.248.08 4.248.08 8 1440 Site Acquisition 0.00 0.00 0.00 0.00 9 1450 Site Improvement 65,000.00 65,000.00 55,000.00 55,000.00 10 1460 Dwelling Structures 738,706.20 738,706.20 446,334.21 446,334,21 11 1465.1 Dwelling Equipment—Nonexpendable 50,000.00 50,000.00 50,000.00 50,000.00 1470 Nondwelling Structures 12 20,000.00 20,000.00 16,140.44 16,140.44 13 1475 Nondwelling Equipment 4.175.00 4.175.00 3,776.00 3,776.00 1485 Demolition 14 15 1490 Replacement Reserve 16 1492 Moving to Work Demonstration 17 1495.1 Relocation Costs 18 1499 Development Activities 1501 Collaterization or Debt Service 19 20 1502 Contingency 21 Amount of Annual Grant: (sum of lines 2 - 20) 1,499,802.00 1,499,802.00 963,660.05 963,660.05 Amount of line 21 Related to LBP Activities 22 Amount of line 21 Related to Section 504 compliance Amount of line 21 Related to Security - Soft Costs 24 184,960.40 184,960.40 25 Amount of Line 21 Related to Security - Hard Costs 184,960,40 184,960,40 26 Amount of line 21 Related to Energy Conservation Measures

PHA Name: Sprii	ngfield Housing Authority	Grant Type and N	Number			Federal FY of Grant:			
Timi Tiume. Spin		Capital Fund Prog	gram Grant No: IL	P004501-04		2004			
		Replacement Hou	sing Factor Grant	No:					
Development Number Name/HA-Wide	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Esti	mated Cost	Total Actual Cost		Status of Work	
Activities									
				Original	Revised	Funds Obligated	Funds Expended		
PHA Wide	Operations	1406		149,980.20	149,980.20	0.00	0.00		
	TOTAL 1406	1406		149,980.20	149,980.20	0.00	0.00		
PHA Wide	Security Salaries	1408		118,380.40	118,380.40	118,380.40	118,380.40	Expended	
I IIA WILE	Security Benefits	1408		66,580.00	66,580.00	66,580.00	66,580.00	Expended	
	Staff Travel/Training	1408		35,000.00	35,000.00	20,112.37	20,112.37	Expended	
	Computer Hardware	1408		17,500.00	17,500.00	6,722.73	6,722.73	Expended	
	Computer Software	1408		17,500.00	17,500.00	17,500.00	17,500.00	Expended	
	Marketing	1408		35,000.00	35,000.00	8,597.67	8,597.67	Expended	
	Repair Key hole ceiling	1408		10,000.00	10,000.00	287.95	287.95	Expended	
	TOTAL 1408	1408		299,960.40	299,960.40	238,181.12	238,181.12	P	
PHA Wide	FM&C Salaries	1410		113,653.54	113,653.54	113,653.54	113,653.54	Expended	
THA WILL	FM&C Benefits	1410		36,326.66	36,326.66	36,326.66	36,326.66	Expended	
	TOTAL 1410	1410		149,980.20	149,980.20	149,980.20	149,980.20	Expended	
PHA Wide	Audit	1411		2,000.00	2,000.00	0.00	0.00	Await audit	
	TOTAL 1411	1411		2,000.00	2,000.00	0.00	0.00		
PHA Wide	Fees & Costs	1430		20,000.00	20,000.00	4,248.08	4,248.08	On-going	
	TOTAL 1430	1430		20,000.00	20,000.00	4,248.08	4,248.08		
4-10 Lincolnwood	Asphalt Driveways	1450	28	35,000.00	35,000.00	35,000.00	35,000.00	Complete	
4-20 Winch	Correct Draining/Terrace Slope	1450		10,000.00	10,000.00	0.00	0.00	On-hold	
4-12	Replace Pavement Dumpsters	1450	5-sites	20,000.00	20,000.00	20,000.00	20,000.00	Complete	
	TOTAL 1450	1450		65,000.00	65,000.00	55,000.00	55,000.00		

PHA Name: Sprin	agfield Housing Authority	Grant Type and N				Federal FY of Grant: 2004			
		Capital Fund Prog							
<b>.</b>		Replacement Hou			1.0	T . 1 .	1.0		
Development	General Description of Major Work	Dev. Acct No.	Quantity	Total Estimated Cost		Total Ac	Status of		
Number	Categories							Work	
Name/HA-Wide Activities									
Activities				Original	Revised	Funds	Funds		
				Ü		Obligated	Expended		
IL 4-5 Brandon	Electrical Upgrade-Install disconnects	1460	50%	60,000.00	0.00	0.00	0.00	Budget Rev	
<u>IL 4-9</u> <u>Hildebrandt</u>									
4-9	Generators	1460	1	35,000.00	29,000.00	0.00	0.00	Budget Rev	
4-9	Electrical Upgrades-	1460	151	262,000.00	262,000.00	262,000.00	262,000.00	Expended	
	<ul> <li>Improve grounding systems to</li> </ul>								
	code								
	<ul> <li>Replace electrical panels in</li> </ul>								
	each apartment								
	Tying systems into fire alarms								
	Upgrade for HVAC								
IL 4-9	Replace Closet Door	1460	50%	25,000.00	25,000.00	0.00	0.00		
4-12 Bkl Ave.	Replace windows-Phase I	1460	33 Units	215,465.00	215,465.00	84,936.82	84,936.82		
4-14	New Roofs- Phase II	1460	8 units	45,000.00	45,000.00	27,489.48	27,489.48		
<u>IL 4-22</u>									
#31 Eton Ct	New HVAC	1460	1	3,500.00	6,500.00	6,385.50	6,385.50	Budget Rev	
208 Durkin	New HVAC	1460	1	3,500.00	6,500.00	6,385.50	6,385.50	Budget Rev	
Scattered	New Roofs	1460		0.00	50,000.00	34,821.91	34,821.91	Budget Rev	
Madison Park	New HVAC System - Phase II	1460	1	20,000.00	0.00	0.00	0.00	Budget Rev	
(MP) Daycare									
MP Daycare	Replace Ceiling Lights-Phase I	1460	50%	12,500.00	0.00	0.00	0.00	Budget Rev	
1111 S. 19 <sup>th</sup>	Install Electrical Disconnects and Panels	1460		31,741.20	31,741.20	24,315.00	24,315.00		
Bonansinga Hi- Rise	Replace Hallway Carpet	1460		0.00	42,500.00	0.00	0.00	Budget Rev.	
All Hi-Rises	Triad Boilers	1460	6	25,000.00	25,000.00	0.00	0.00		

PHA Name: Sprii	PHA Name: Springfield Housing Authority		Grant Type and Number Capital Fund Program Grant No: ILP004501-04 Replacement Housing Factor Grant No:				Federal FY of Grant: 2004		
Development Number Name/HA-Wide Activities	Number Categories Name/HA-Wide		Quantity	Total Esti	mated Cost	Total Actual Cost		Status of Work	
				Original	Revised	Funds Obligated	Funds Expended		
	TOTAL 1460	<u>1460</u>		738,706.20	738,706.20	446,334.21	446,334.21		

#### Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

PHA Name: Spri	ngfield Housing Authority	Grant Type and	Number			Federal FY of Grant: 2004		
1		Capital Fund Pro	gram Grant No: <b>IL</b>					
		Replacement Hou	sing Factor Grant	No:				
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Esti	mated Cost	Total Ac	Total Actual Cost	
				Original	Revised	Funds Obligated	Funds Expended	
All Developments	Refrigerators/Stoves	1465	151	50,000.00	50,000.00	50,000.00	50,000.00	Expended
	<b>TOTAL 1465</b>	<u>1465</u>		50,000.00	50,000.00	50,000.00	50,000.00	
Scattered Sites 4-25	Utility Sheds	1470	16	20,000.00	20,000.00	16,140.44	16,140.44	
	TOTAL 1470	<u>1470</u>		20,000.00	20,000.00	16,140.44	16,140.44	
PHA WIDE	Key Cutting Machine	1475	1	2,300.00	0.00	0.00	0.00	
	Lockable Key Cabinet	1475	1	675.00	0.00	0.00	0.00	
	Sewer Eels	1475	2	1,200.00	0.00	0.00	0.00	
	Plan Restoration Room	1475	1	0.00	4,175.00	3,776.00	3,776.00	
	TOTAL 1475	<u>1475</u>		4,175.00	4,175.00	3,776.00	3,776.00	

PHA Name: Sprin	ngfield Housing Authority		<b>Number</b> gram Grant No: <b>ILI</b> Ising Factor Grant N	Federal FY of Grant: 2004				
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity		mated Cost	Total Ac	ctual Cost	Status of Work
				Original Revised		Funds Obligated	Funds Expended	
	TOTAL GRANT			1,499,802.00	1,499,802.00	963,660.05	963,660.05	

PHA Name: Springfield	Housing Author		Type and Nur				Federal FY of Grant: 2004
			al Fund Progra acement Housir	m No: IL06P004 ng Factor No:	501-04		
Development Number Name/HA-Wide Activities		Fund Obligat ter Ending D			ll Funds Expended uarter Ending Date		Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
1406- Operations	9-13-06		8-28-06	9-13-08			
1408-Management Improvements	9-13-06		8-28-06	9-13-08			
1410-Administrative	9-13-06		8-28-06	9-13-08			
1411-Audit	9-13-06		8-28-06	9-13-08			
1430-Fees/costs	9-13-06		8-28-06	9-13-08			
1450-Site improvement	9-13-06		8-28-06	9-13-08			
1460 –Dwelling Sites	9-13-06		8-28-06	9-13-08			
1465.1-Dwelling Equipment-Non- expendable	9-13-06		8-28-06	9-13-08			
1475-Non Dwelling Equipment	9-13-06		8-28-06	9-13-08			

#### **Annual Statement/Performance and Evaluation Report** Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary Grant Type and Number ILP004-501000 Federal FY of Grant: PHA Name: Springfield Housing Authority 2005 Capital Fund Program Grant No: IL06P004501-05 Replacement Housing Factor Grant No: Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no: X Performance and Evaluation Report for Period Ending:06/30/06 Final Performance and Evaluation Report **Summary by Development Account Total Estimated Cost Total Actual Cost** No. **Original** Revised **Obligated Expended** Total non-CFP Funds 1406 Operations 0.00 0.00 145,414.00 0.00 1408 Management Improvements 290,828.00 290,828.00 290,828.00 290,828.00 4 1410 Administration 145,414.00 145,414.00 145,414.00 145,414.00 1411 Audit 2,500.00 2,500.00 0.00 0.00 1415 Liquidated Damages 1430 Fees and Costs 45,000.00 45,000.00 13.184.21 13,184.21 1440 Site Acquisition 1450 Site Improvement 22,000.00 0.00 22,000.00 0.00 70,387.01 1460 Dwelling Structures 70,387.01 10 637,786.00 637,786.00 0.000.00 11 1465.1 Dwelling Equipment—Nonexpendable 8,000,00 8,000.00 1470 Nondwelling Structures 12 13 1475 Nondwelling Equipment 7,200.00 7,200.00 373.00 373.00 1485 Demolition 14 1490 Replacement Reserve 15 1492 Moving to Work Demonstration 16 1495.1 Relocation Costs 17 18 1499 Development Activities 150,000.00 150,000.00 0.00 0.00 1501 Collaterization or Debt Service 19 1502 Contingency 20 21 **Amount of Annual Grant: (sum of lines 2–20)** 1,454,142.00 1,454,142.00 520,186,22 520,186,22 22 Amount of line 21 Related to LBP Activities 23 Amount of line 21 Related to Section 504 compliance 24 Amount of line 21 Related to Security – Soft Costs 25 Amount of Line 21 Related to Security- Hard Costs 26 Amount of line 21 Related to Energy Conservation Measures

PHA Name: <b>Spri</b>	ngfield Housing Authority	Grant Type and Nu Capital Fund Progra	am Grant No: $f I$		)5	Federal FY of G	rant: 2005	
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Replacement Housi Dev. Acct No.	Quantity	Total Estin	nated Cost	Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
PHA Wide	Operations TOTAL 1406	1406 <b>1406</b>		145,414.00 <b>145,414.00</b>	0.00 <b>0.00</b>	0.00 <b>0.00</b>	0.00 <b>0.00</b>	
PHA Wide	Marketing	1408		15,000.00	15,000.00	0.00	0.00	On-going
	Staff training and travel Maintenance Agreements	1408 1408		50,000.00 5,000.00	50,000.00 5,000.00	0.00 5,00.00	0.00 5,000.00	On-going Expende
	Upgrade Computer Systems	1408		10,000.00	10,000.00	0.00	0.00	On-goin
	Security Salaries Security Benefits	1408 1408		105,414.00 105,414.00	105,414.00 105,414.0	105,414.00 80,695.92	105,414.00 80,695.92	Expende On-goin
	TOTAL 1408	1408		290,828.00	290,828.00	191,109.92	191,109.92	
PHA Wide	FM&C Salaries FM&C Benefits	1410 1410		72,707.00 72,707.00	72,707.00 72,707.00	72,707.00 72,707.00	72,707.00 72,707.00	Expende
	TOTAL 1410	1410		145,414.00	145,414.00	145,414.00	145,414.00	Expende
PHA Wide	Audit	1411		2,500.00	2,500.00	0.00	0.00	Await grant close-out
	TOTAL 1411	1411		2,500.00	2,500.00	0.00	0.00	
PHA Wide	Fees and Costs	1430		40,000.00	40,000.00	13,184.21	13,184.21	On-going
	Asbestos Study TOTAL 1430	1430 1430		5,000.00 <b>45,000.00</b>	5,000.00 <b>45,000.00</b>	0.00 <b>13,184.21</b>	0.00 <b>13,184.21</b>	On-going

PHA Name: Spri	ngfield Housing Authority	Grant Type and N	lumber			Federal FY of	Grant: 2005	
<u></u>	<u></u>	Capital Fund Prog	ram Grant No: <b>II</b>	.06P004501-0	5			
		Replacement Hou	sing Factor Grant	No:				
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estin	mated Cost	Total Ac	Status of Work	
				Original	Revised	Funds Obligated	Funds Expended	
4-10 Lincolnwood, Johnson Park	Repair/Replace sidewalks & Drives	1450		20,000.00	20,000.00	0.00	0.00	Not started
IL4-14	Parking Blocks	1450	20	2,000.00	2,000.00	0.00	0.00	Not started
	TOTAL 1450	1450		22,000.00	22,000.00	0.00	0.00	
H 4 5 D 1	Electrical Hannala Discourant Discour	1460		40,000,00	40,000,00	0.00	0.00	NI-4-4-4-1
IL4-5 Brandon	Electrical Upgrade Disconnects Phase II	1460	<i>C</i> CI	40,000.00	40,000.00	0.00	0.00	Not started
IL4-3a Bonansinga	Install Floor Tile – Phase I	1460	6 flrs	128,000.00	88,000.00	0.00	0.00	Bid phase
4-9 Hildebrandt	<ul> <li>Plumbing upgrades</li> <li>Replace Drain Piping for shower, lavatory and kitchen.</li> <li>Replace shut-off valves with ball-type valves</li> </ul>	1460		40,000.00	80,00.00	0.00	0.00	Budget rev.
PHA Wide	Cycle Painting	1460		10,000.00	10,00.00	0.00	0.00	Not started
	Window Washing	1460	2	10,.000.00	10,000.00	0.00	0.00	Not started
	Power Washing of Buildings	1460		30,000.00	30,000.00	0.00	0.00	Not started
All Hi-Rises	Generators	1460	1	36,000.00	36,000.00	0.00	0.00	Ordered, await install.
	A/C Install	1460		111,286.00	111,286.00	0.00	0.00	Not started
	Upgrade entry system	1460		20,000.00	20,000.00	0.00	0.00	Not started
IL4-12	Replace Windows-Phase II	1460	33	110,000.00	110,000.00	0.00	0.00	Bid phase
	Replace Furnaces and A/C – Phase II	1460	25	62,500.00	62,500.00	0.00	0.00	Bid phase
IL4-14	Replace furnaces and A/C Phase II Final	1460	14	35,000.00	35,000.00	7,442.00	7,442.00	On-going
200 N. 11 <sup>th</sup> St.	Upgrade ADA accessibility entrance	1460	1	5,000.00	5,000.00	0.00	0.00	Not started
	TOTAL 1460	1460		637,786.00	637,786.00	7,442.00	7,442.00	
PHA Wide	Replace Appliances	1465.1		8,000.00	8,000.00	0.00	0.00	Not started
	TOTAL 1465.1			8,000.00	8,000.00	0.00	0.00	3

PHA Name: <b>Spri</b>	ngfield Housing Authority	Grant Type and N			_	Federal FY of	Grant: 2005	
		Capital Fund Progr Replacement Hous			5			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estin	mated Cost	Total Ac	ctual Cost	Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
PHA Wide	Security Improvements:  • Cameras, Monitors, DVR, Folding Fence	1475		3,000.00	3,000.00	0.00	0.00	Bid phase
	Plumbing Eels	1475		1,200.00	1,200.00	0.00	0.00	Not ordered
	Upgrade 1910 Truman Rd Elec. Amps and sub panels	1475		3,000.00	3,000.00	373.00	373.00	Bid phase
	TOTAL 1475	1475		7,200.00	7,200.00	373.00	373.00	
Re-Development of Major Byrd Complex	Capital Fund Dollars will be used as part of a mixed finance project to include demolition, design and construction of new single family dwelling units on the site and off-site	1499		150,000.00	150,000.00	0.00	0.00	Awaiting approval of Developme nt Plan.
	TOTAL 1499			150,000.00	150,000.00	0.00	0.00	
	TOTAL GRANT			1,454,142.00	1,454,142.00	520,186.22	520,186.22	

Part III: Implementation Schedule

PHA Name: <b>Springfiel</b>	d Housing A	Authority	Grant Type a				Federal FY of Grant: 2005
			Capital Fund	Program No: <b>IL06</b>	5P004501-05		
			Replacement	Housing Factor No	):		
Development Number	All	Fund Obligat	ted	Al	ll Funds Expended	1	Reasons for Revised Target Dates
Name/HA-Wide Activities	(Qua	arter Ending D	Date)	(Qı	uarter Ending Date	e)	
	Original	Revised	Actual	Original	Revised	Actual	
1406 Operations	9/30/07			9/30/09			
1408 Management Improvements	9/30/07			9/30/09			
1410 Administration	9/30/07			9/30/09			
1411 Audit	9/30/07			9/30/09			
1430 Fees and Costs	9/30/07			9/30/09			
1450	9/30/07			9/30/09			
Site Improvement							
1460	9/30/07			9/30/09			
<b>Dwelling Structure</b>							
1465.1 Dwelling Equipment Nonexpendable	9/30/07			9/30/09			
1475 Non-dwelling Equipment	9/30/07			9/30/09			
1499 Development Activities	9/30/07			9/30/09			

#### - 1 -**Annual Statement/Performance and Evaluation Report** Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary **Grant Type and Number** PHA Name: Springfield Housing Authority Federal FY of Grant: Capital Fund Program Grant No: IL06P00450106 2006 Replacement Housing Factor Grant No: Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no: X Performance and Evaluation Report for Period Ending:06/30/06 Final Performance and Evaluation Report **Summary by Development Account** Line **Total Estimated Cost Total Actual Cost** No. **Original** Revised **Obligated Expended** Total non-CFP Funds 1406 Operations 143,251.80 143251.80 0.00 0.00 1408 Management Improvements 286,503.60 0.00 0.00 286,503.60 0.001410 Administration 143,251.80 143,251,80 0.00 1411 Audit 2,500.00 2,500.00 0.00 0.00 1415 Liquidated Damages 1430 Fees and Costs 45,000.00 45,000.00 0.00 0.00 1440 Site Acquisition 1450 Site Improvement

514,209.36

6,000.00

7,200.00

20,000.00

150,000.00

114,601.44

1,432,518.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

514,209.36

6,000.00

7,200.00

20,000.00

150,000.00

114,601,44

1,432,518.00

10

11

12

13

14

15

16

17

18

20

21

22 23

24

25

1460 Dwelling Structures

1485 Demolition

1502 Contingency

1470 Nondwelling Structures
1475 Nondwelling Equipment

1490 Replacement Reserve

1499 Development Activities

1495.1 Relocation Costs

1492 Moving to Work Demonstration

1501 Collaterization or Debt Service

Amount of Annual Grant: (sum of lines 2 – 20)

Amount of line 21 Related to Section 504 compliance

Amount of line 21 Related to Security - Soft Costs

Amount of Line 21 Related to Security – Hard Costs

Amount of line 21 Related to Energy Conservation Measures

Amount of line 21 Related to LBP Activities

1465.1 Dwelling Equipment—Nonexpendable

Capital Fund Program and Capital<sup>2</sup>Fund Program Replacement Housing Factor (CFP/CFPRHF)

	ngfield Housing Authority	Replacement H	rogram Grant No ousing Factor G			Federal FY of Grant: 2006			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estim	aated Cost	Total A	ctual Cost	Status of Work	
				Original	Revised	Funds Obligated	Funds Expended		
PHA Wide	Operations	1406		143,251.80	143,251.80	0.00	0.00	Grant awaits HUD approva	
	TOTAL 1406			143,251.80	143,251.80	0.00	0.00		
PHA Wide	Marketing	1408		15,000.00	15,000.00	0.00	0.00		
	Staff training	1408		45,675.60	45,675.60	0.00	0.00		
	Upgrade Computer Systems	1408		11,000.00	11,000.00	0.00	0.00		
	Security Salaries	1408		105,414.00	105,414.00	0.00	0.00		
	Security Benefits	1408		105,414.00	105,414.00	0.00	0.00		
	Energy Conservation	1408		4,000.00	4,000.00	0.00	0.00		
	TOTAL 1408			286,503.60	286,503.60	0.00	0.00		
PHA Wide	FM&C Salaries	1410		71,625.90	71,625.90	0.00	0.00		
	FM&C Benefits	1410		71,625.90	71,625.90	0.00	0.00		
	TOTAL 1410	-		143,21.80	143,21.80	0.00	0.00		
PHA Wide	Audit	1411		2,500.00	2,500.00	0.00	0.00		
11111 1/100	TOTAL 1411	1111		2,500.00	2,500.00	0.00	0.00		
PHA Wide	Fees and Costs	1430		40,000.00	40,000.00	0.00	0.00		
11111 // 100	Asbestos Study	1430		5,000.00	5,000.00	0.00	0.00		
	TOTAL 1430	1.00		45,000.00	45,000.00	0.00	0.00		
4-3a Bonansinga Hi-rise	Upgrade Electrical; improve grounding system, tie electrical system into fire alarm and upgrade exhaust fans. Phase I	1460	50 units	98,418.72	98,418.72	0.00	0.00		
4-5 Brandon	Community Center Roof Replacement	1460	1	10,000.00	10,000.00	0.00	0.00		
4-12 Scattered Sites	Hot Water Heaters-Phase I	1460	25	9,000.00	9,000.00	0.00	0.00		
	Replace HVAC – Phase III final	1460	25	62,500.00	62,500.00	0.00	0.00		
4-14 Scattered Sites	Hot Water Heaters	1460	14	5,000.00	5,000.00	0.00	0.00		

Capital Fund Program and Capital<sup>3</sup>Fund Program Replacement Housing Factor (CFP/CFPRHF)

PHA Name: <b>Spri</b> i	ngfield Housing Authority	Grant Type and Capital Fund Pr Replacement H	rogram Grant No	o: <b>IL06P0045010</b> Frant No:	6	Federal FY of Grant: 2006			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct Quantity Total Estimated Cost No.		Total A	ctual Cost	Status of Work			
				Original	Revised	Funds Obligated	Funds Expended		
	Replace Kitchen Cabinets/Countertops – Phase II	1460	10 units	20,000.00	20,000.00	0.00	0.00		
	Thermostats	1460	20	1,500.00	1,500.00	0.00	0.00		
4-18	Hot Water Heaters	1460	20	7,000.00	7,000.00	0.00	0.00		
	Replace Roofs – Phase I	1460	19 units	75,000.00	75,000.00	0.00	0.00		
4-19	Replace Roofs – Phase I	1460	19 units	75,000.00	75,000.00	0.00	0.00		
4-22	Replace Roofs	1460	8 units	50,000.00	50,000.00	0.00	0.00		
All Hi-rises	A/C Install	1460		100,000.00	100,000.00	0.00	0.00		
	TOTAL 1460			514,209.36	514,209.36	0.00	0.00		
4-9 Hildebrandt Hi-rise	Property Acquisition and Demolition	1485	1	20,000.00	20,000.00	0.00	0.00		
	TOTAL 1485			20,000.00	20,000.00	0.00	0.00		
4-20 Scattered Sites	Replace Mailboxes with Community Boxes- Phase I	1475	15	7,200.00	7,200.00	0.00	0.00		
	TOTAL 1475			7,200.00	7,200.00	0.00	0.00		
						0.00	0.00		
PHA Wide	Stoves/Refrigerators	1465.1		6,000.00	6,000.00	0.00	0.00		
	TOTAL 1465.1			6,000.00	6,000.00	0.00	0.00		
Re-development of Major Byrd Complex	Capital Fund dollars will be used as part of a mixed finance project to include demolition, design and construction of new single family dwelling units on the site and of site.	1499		150,000.00	150,000.00	0.00	0.00		
	TOTAL 1499			150,000.00	150,000.00	0.00	0.00		
				,	ĺ				
PHA Wide	Contingency	1502		114,601.22	114,601.22	0.00	0.00		
	TOTAL 1502			114,601.22	114,601.22	0.00	0.00		
	TOTAL GRANT			1,432,518.00	1,432,518.00	0.00	0.00		

**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)** 

Part III: Implementation Schedule

Tart III. Impicin							
PHA Name: <b>Springfiel</b>	d Housing A	Authority	Grant Type a				Federal FY of Grant: 2006
		<u></u>	Capital Fund Replacement	Program No: <b>IL0</b> Housing Factor No	<b>6P00450106</b> o:		
Development Number Name/HA-Wide		l Fund Obliga arter Ending I	ted				Reasons for Revised Target Dates
Activities							
	Original	Revised	Actual	Original	Revised	Actual	
1406							
1408							
1410							
1411							
1430							
1460							
1465.1							
1475							
1485							
1499							
1502							

Amount of Line 21 Related to Security – Hard Costs

Amount of line 21 Related to Energy Conservation Measures

#### **Annual Statement/Performance and Evaluation Report** Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary **Grant Type and Number** PHA Name: Springfield Housing Authority Federal FY of Grant: Capital Fund Program Grant No: IL06P00450107 2007 Replacement Housing Factor Grant No: X Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no: **Final Performance and Evaluation Report Performance and Evaluation Report for Period Ending:** Line **Summary by Development Account Total Estimated Cost Total Actual Cost** No. **Original** Revised **Obligated** Expended Total non-CFP Funds 1406 Operations 143,251.80 1408 Management Improvements 286,503.60 1410 Administration 143,251.80 1411 Audit 2,500.00 1415 Liquidated Damages 1430 Fees and Costs 45,000.00 1440 Site Acquisition 1450 Site Improvement 19,200.00 503,209,36 10 1460 Dwelling Structures 1465.1 Dwelling Equipment—Nonexpendable 11 5,000.00 1470 Nondwelling Structures 12 1475 Nondwelling Equipment 13 20,000.00 14 1485 Demolition 1490 Replacement Reserve 15 1492 Moving to Work Demonstration 16 17 1495.1 Relocation Costs 1499 Development Activities 18 150,000.00 19 1501 Collaterization or Debt Service 20 1502 Contingency 114,601.44 21 1,432,518.00 Amount of Annual Grant: (sum of lines 2–20) 22 Amount of line 21 Related to LBP Activities Amount of line 21 Related to Section 504 compliance 23 24 Amount of line 21 Related to Security - Soft Costs

Capital Fund Program and Capital<sup>2</sup>Fund Program Replacement Housing Factor (CFP/CFPRHF)

PHA Name: <b>Spri</b>	ngfield Housing Authority	Grant Type and N Capital Fund Progr Replacement Hous	am Grant No: <b>II</b>	No:		Federal FY of Grant: 2007		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No. Quantity Total Estimated Cost		Total Ac	Status of Work			
				Original	Revised	Funds Obligated	Funds Expended	
PHA Wide	Operations	1406		143,251.80			•	
	TOTAL 1406			143,251.80				
PHA Wide	Marketing	1408		15,000.00				
11111 // 100	Staff training	1408		50,000.00				
	Upgrade Computer Systems	1408		10,675.60				
	Security Salaries	1408		105,414.00				
	Security Benefits	1408		105,414.00				
	TOTAL 1408			286,503.60				
PHA Wide	FM&C Salaries	1410		71,625.90				
THA WILC	FM&C Benefits	1410		71,625.90				
	TOTAL 1410	1110		143,251.80				
DII 4 377' 1	A 197	1411		2.500.00				
PHA Wide	Audit TOTAL 1411	1411		2,500.00 2,500.00				
				,				
PHA Wide	Fees and Costs	1430		40,000.00				
	Asbestos Study	1430		5,000.00				
	TOTAL 1430			45,000.00				
PHA Wide	Cycle Painting	1460		10,000.00				
	Window Washing	1460		10,000.00				
	Power Washing Buildings	1460		30,000.00				
4-3a Bonansinga	Replace risers and shut off valves	1460		10,774.56				
4-3a Bonansinga	Replace drain piping for showers, lavatory and kitchen	1460		58,936.00				
	Sub Total 1460			119,710.56				

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

PHA Name: <b>Spri</b>	ngfield Housing Authority	Grant Type and N Capital Fund Prog Replacement House	ram Grant No: <b>II</b>			Federal FY of	Grant: 2007	
Development Number Name/HA-Wide Activities	General Description of Major Work Categories  Dev. Acct No. Quantity Total Esti		Total Estimated Co	ost	Total Actual Cost		Status of Work	
4-12 Scattered Sites	Hot Water Heaters-Phase II	1460	31	10,850.00				
4-14 Scattered Sites	Interior/Exterior Outlet	1460	20	4,000.00				
4-14 Scattered Sites	Replace Siding and Soffits	1460	20	45,000.00				
4-14 Scattered Sites	Replace Kitchen Cabinets/Countertops— Phase I	1460	10	65,000.00				
4-18 Scattered Sites	Replace HVAC- Phase I	1460	19	50,000.00				
4-18 Scattered Sites	Kitchen Cabinet/Countertop Replacement - Phase I	1460	19	65,000.00				
4-19 Scattered Sites	Replace HVAC – Phase I	1460	19	50,000.00				
4-19 Scattered Sites	Replace Waters Heaters – Phase I	1460	19	13,648.80				
All Hi-rises	A/C Install	1460		60,000.00				
PHA Wide	Carbon Monoxide Detectors	1460	960	40,000.00				
	TOTAL 1460			523,209.36				
4-12 Scattered Site and All Hirises	Reseal parking lots	1450		19,200.00				
	TOTAL 1450			19,200.00				
PHA Wide	Stoves/Refrigerators	1465		5,000.00				
	TOTAL 1465			5,000.00				
PHA Wide	Replace Maintenance Vehicle	1475	1	20,000.00				
	TOTAL 1475			20,000.00				

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

PHA Name: <b>Spri</b>	ngfield Housing Authority	Grant Type and N Capital Fund Prog		Federal FY of Grant: 2007				
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Replacement Hous Dev. Acct No.	Quantity	Total Estimat	ted Cost	Total Ac	ctual Cost	Status of Work
Re-development of Major Byrd Complex and 415 Sankey Hi-rise	Capital Fund dollars will be used as part of a mixed finance project to include demolition of dilapidated units, design and construction of new public housing developments.	1499		150,000.00				
	TOTAL 1499			150,000.00				
PHA Wide	Contingency TOTAL 1502	1502		114,601.44 114,601.44				
	TOTAL GRANT			1,432,518.00				

PHA Name: <b>Springfiel</b>	Grant Type a	nd Number		Federal FY of Grant: 2007				
<u> </u>					P00450107			
Development Number Name/HA-Wide Activities		Fund Obligat arter Ending D		All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates	
	Original	Revised	Actual	Original	Revised	Actual		
1406				-				
1408								
1410				_				
1411		_						
1430								
1460				_				
1465.1		_						
1475		_						
1485								
1499		_						
1502								
					•			

### **Five-Year Action Plan** Part I: Summary Comprehensive Grant Program (CGP)

#### U.S. Department of Housing and Urban Development

HA Name:	Locality (City/	County & State):		X Original	Revision No.	
SPRINGFIELD HOUSING AUTHORITY	Springfield III	inois (Sangamon County)		Kengma		
A. Development Number/Name	Work Stmt. for Year 1 FFY:20 <u>07</u>	Work Statement for Year 2 FFY: 2008	Work Statement for Year 3 FFY: 2009	Work Statement for Year 4 FFY: <u>2010</u>	Work Statement for Year 5 FFY: <u>2011</u>	
	See					
B. Physical Improvements Subtotal		637,786.00	637,786.00	637,786.00	666,986.00	
C. Management Improvements		290,828.00	290,828.00	290,828.00	290,828.00	
D. HA-Wide Nondwelling Structures and Equipment		37,200.00	8,000.00	8,000.00	8,000.00	
E. Administration		145,414.00	145,414.00	145,414.00	145,414.00	
F. Other		47,500.00	47,500.00	47,500.00	47,500.00	
G. Operations		145,414.00	145,414.00	145,414.00	145,414.00	
H. Demolition		0.00	0.00	0.00	0.00	
I. Replacement Reserve		0.00	0.00	0.00	0.00	
J. Mod Used for Development		150,000.00	150,000.00	150,000.00	150,000.00	
K. Total CGP Funds		1,454,142.00	1,454,142.00	1,454,142.00	1,454,142.00	
L. Total Non-CGP Funds						
M. Grand Total						
Signature of Public Housing Director/Office of Native American Progra X	ms Administrator a	and Date:	Signature of Public Housing Dire	ector/Office of Native American Prog	grams Administrator and Date:	

#### **Annual Statement/Performance and Evaluation Report** Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary PHA Name: Springfield Housing Authority **Grant Type and Number** Federal FY of Grant: Capital Fund Program Grant No: IL06P004501-01 2001 Replacement Housing Factor Grant No: Original Annual Statement ☐ Reserve for Disasters/ Emergencies ☐ Revised Annual Statement (revision no: XXXXPerformance and Evaluation Report for Period Ending: 06/30/03 **Final Performance and Evaluation Report** Summary by Development Account **Total Estimated Cost Total Actual Cost** No. **Original** Revised **Obligated** Expended Total non-CFP Funds 1406 Operations 345,600.00 345,600.00 345,600.00 345,600.00 325,941.03 1408 Management Improvements 306,000.00 325,941.03 325,941.03 1410 Administration 172,833.00 172,833,50 172.833.50 172,833,50 1411 Audit 0.00 2,500.00 2,500.00 2,500.00 1415 Liquidated Damages 0.00 0.00 0.00 0.00 22,700.00 1430 Fees and Costs 0.00 22,700.00 22,700.00 1440 Site Acquisition 0.00 0.00 0.00 0.00 1450 Site Improvement 0.00 0.00 0.00 0.00 1460 Dwelling Structures 776,516.63 776.516.63 10 807.693.00 776,516,63 1465.1 Dwelling Equipment—Nonexpendable 29,500.00 57,627.50 57,627.50 57,627.50 1470 Non dwelling Structures 12 0.00 2,888.00 2,888.00 2.888.00 1475 Non dwelling Equipment 0.00 8.198.54 8.198.54 8.198.54 13 1485 Demolition 14 0.00 0.00 0.00 0.00 15 1490 Replacement Reserve 0.00 0.00 0.00 0.00 1492 Moving to Work Demonstration 0.00 16 0.00 0.00 0.00 1495.1 Relocation Costs 13,528.80 17 23,500.00 13,528.80 13,528.80 18 1499 Development Activities 0.00 0.00 0.00 0.00 1501 Collaterization or Debt Service 0.00 0.00 0.00 0.00 20 1502 Contingency 23,964.00 8,064.00 0.00 0.00 21 Amount of Annual Grant: (sum of lines 2-20) 1,728,334.00 1,728,334.00 1,728,334.00 1,728,334.00 Amount of line 21 Related to LBP Activities 0.00 0.00 0.00 0.00 Amount of line 21 Related to Section 504 compliance 0.00 0.00 0.00 0.00 23 216,236.50 24 Amount of line 21 Related to Security - Soft Costs 221,000.00 216,236.50 216,236.50 0.00 0.00 0.00 0.00 Amount of Line 21 Related to Security - Hard Costs 26 Amount of line 21 Related to Energy Conservation Measures 0.00 0.00 0.00 0.00

PHA Name: Springfield Housing Authority		Replacement	Program Grar Housing Fact			Federal FY of Grant: 2001			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estin	mated Cost	Total Actual Cost		Status of Work	
				Original	Revised	Funds	Funds		
						Obligated	Expended		
PHA Wide	Operations	1406		345,600.00	345,600.00	345,600.00	345,600.00	Complete	
	TOTAL 1406	1406		345,600.00	345,600.00	345,600.00	345,600.00		
PHA Wide	Computer Software	1408		12,500.00	10,878.00	10,878.00	10,878.00	Complete	
PHA Wide	Staff training & travel	1408		30,000.00	30,000.00	30,000.00	30,000.00	Complete	
PHA Wide	Market	1408		30,000.00	39,906.88	39,906.88	39,906.88	Complete	
PHA Wide	Security Benefits	1408		66,300.00	49,984.98	49,984.98	49,984.98	Complete	
PHA Wide	Security Salaries	1408		154,700.00	166,251.52	166,251.52	166,251.52	Complete	
PHA Wide	Truman Road Security	1408		0.00	7,744.68	7,744.68	7,744.68	Complete	
PHA Wide	Computer Hardware	1408		12,500.00	21,174.97	21,174.97	21,174.97	Complete	
	TOTAL 1408	1408		306,000.00	325,941.03	325,941.03	352,941.03		
PHA Wide	FM&C Salaries	1410		120,983.00	130,442.18	130,442.18	130,442.18	Complete	
PHA Wide	FM&C Benefits	1410		51,850.00	42,391.32	42,391.32	42,391.32	Complete	
	TOTAL 1410	1410		172,833.00	172,833.00	172,833.00	172,833.50		
PHA Wide	Audit	1411		0.00	2,500.00	2,500.00	2,500.00	Audit ordered	
TIM Wide	TOTAL 1411	1411		0.00	2,500.00	2,500.00	2,500.00	7 tudit ordered	
4-2 Major Byrd	Emergencyassessment for Safety	1430		0.00	22,700.00	22,700.00	22,700.00	Complete	
: 2 :::ajo: 2 j:a	TOTAL 1430	1430		0.00	22,700.00	22,700.00	22,700.00	Compact	
	Force Account-*money for projects taken from Salaries and Benefits								
PHA Wide	Force Account Salaries	1460		0.00	223,796.61	223,796.61	223,796.61	Complete	
Force Account	Force Account Benefits	1460		0.00	141,700.91	141,700.91	141,700.91	Complete	
4-12 Scattered Sites	Force Account	1460	1 shed					Paint shed @ 1014 S. Durkin	
4-3a Bonansinga	Force Account	1460						Interior renovation 4-3a	
PHA Wide	Force Account	1460	5 Hi- Rises					Remodel hi-rise lobbies & public restrooms	

PHA Name: Springfield Housing Authority				t No: <b>IL06P0</b> 0 or Grant No:	04501-01	Federal FY of Grant: 2001			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	f Major Work Dev. Acct Quantity Total Estimated Cost		mated Cost	Total Ac	tual Cost	Status of Work		
Tienvines				Original	Revised	Funds Obligated	Funds Expended		
PHA Wide	Force Account	1460	27					Paint vacant units over 51 days	
4-3 Bonansinga	Force Account	1460	1					Library rehab	
4-12 Scattered Sites	Force Account	1460	6					Install Trash surrounds	
4-9 HIildebrandt	Force Account	1460						Replace damaged ceiling tile	
4-3a Bonansinga	Force Account	1460						Replaced 1 <sup>st</sup> floor ceiling tile	
4-3b, 4-6 401/415 Sankey	Force Account	1460						Replace damaged ceiling tile	
4-9 Hildebrandt	Force Account	1460	39					Replace Hallway lights	
4-3b, 4-6 401/415 Sankey	Force Account-installed new lighting on 1 <sup>st</sup> floor and receptacles	1460						Upgrade emergency electric systems	
4-9 Hildebrandt	Force Account	1460	1 bldg					Upgrade emergency electric systems	
4-31a Bonansinga	Force Account	1460	1 bldg					Upgrade emergency electric systems	
	SUB TOTAL 1460			0.00	365,497.52	365,497.52	365,497.52		

PHA Name: Springfield Housing Authority		Grant Type and N	lumber		Federal FY of Grant: 2001			
	-8	Capital Fund Prog						
		Replacement House	sing Factor Grant N					
Development Number Name/HA-Wide Activities	Number Categories Name/HA-Wide		Dev. Acct No. Quantity Total Estimated Cost		ated Cost	Total Act	Status of Work	
				Original	Revised	Funds Obligated	Funds Expended	
Brandon 4-5	Furnace Replacement	1460	72	6,600.00	8,625.64	8,625.64	8,625.64	Complete
Sankey 401/415	Replace shower valves 401	1460		28,204.00	2,274.23	2,274.23	2,274.23	Complete
4-6	Replace heat risers 401	1460	S.W. 80 ft N.E. 80 ft	2,500.00	453.70	453.70	453.70	Complete
Sankey 415 4-3b	Replace waste lines 401	1460	10 units	5,000.00	0.00	0.00	0.00	
Sankey 415 4-3b	Replace shower valves 415	1460	0	28,204.00	4,004.55	4,004.55	4,004.55	Complete
Sankey 415 4-3b	Replace heat riser 415	1460		2,500.00	0.00	0.00	0.00	
Sankey 415 4-3b	Replace waste lines 415	1460		5,000.00	1,970.00	1,970.00	1,970.00	Complete
Sankey 415 4-3b	Repair flu pipe 415	1460	2	0.00	5,253.00	5,253.00	5,253.00	Complete
Hildebrandt Hirise 4-9	Replace sink/shutoff valves	1460	125 out of maintenance budget	2,500.00	0.00	0.00	0.00	Complete
Hildebrandt Hirise 4-9	Replace thermostats	1460	0	1,500.00	0.00	0.00	0.00	Not Complete
Hildebrandt Hirise 4-9	Install insulated a/c sleeves	1460		31,346.00	14,758.58	14,758.58	14,758.58	Complete
Hildebrandt 4-9	Upgrade smoking room ventilation	1460	1	5,000.00	4,474.81	4,474.81	4,474.81	Complete
4-10 Development	Furnaces	1460	10	0.00	1,151.32	1,151.32	1,151.32	Complete
4-10 Johnson Park	Electrical upgrades	1460	1 unit	0.00	488.27	488.27	488.27	Complete
4-22 Scattered Sites	Concrete repair and sealant	1460	4	23,731.00	4,228.50	4,228.50	4,228.50	Complete

PHA Name: Sprin	gfield Housing Authority	Grant Type and N	umber		Federal FY of Grant: 2001			
	8	Capital Fund Programment House						
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
rictivities				Original	Revised	Funds Obligated	Funds Expended	
Hildebrandt 4-9	Front Entrance Upgrade	1460		0.00	86,778.85	86,778.85	86,778.85	Complete
4-12 Apartments	Replace roofs and guttering	1460	5 sites	50,000.00	57,541.40	57,541.40	57,541.40	Complete
4-14 Scattered Sites	Replace roofs and guttering	1460	12	45,000.00	53,457.86	53,457.86	53,457.86	Complete
4-14	Replace furnaces, a-coils/condensers	1460	2 units	15,500.00	1,300.87	1,300.87	1,300.87	Complete
4-18 Scattered Sites	Asphalt seal coat	1460	7	39,500.00	6,234.00	6,234.00	6,234.00	Complete
4-19	Asphalt seal coat	1460		39,000.00	6,234.00	6,234.00	6,234.00	Complete
4-31a	Refinish office	1460		0.00	0.00	0.00	0.00	
4-2, 4-9, 4-6	Boiler installation	1460	5	0.00	11,540.70	11,540.70	11,540.70	Complete
All Hi-rises	Update electrical outlets	1460		0.00	1,284.26	1,284.26	1,284.26	Complete
Major Byrd	Interior/exterior renovations (See Force Account)	1460		169,000.00	51,837.81	51,837.81	51,837.81	Dollars re-budgeted- development shutdown
4-2	Replace heat risers	1460		5,000.00	3,128.00	3,128.00	3,128.00	Complete
Bonansinga	Interior renovations	1460		297,608.00	81,278.35	81,278.35	81,278.35	Complete
4-31	Roof repair	1460	1	0.00	251.62	251.62	251.62	Complete
4-31	Replace Heat risers	1460		5,000.00	181.44	181.44	181.44	Complete
	SUB TOTAL 1460			807,693.00	774,229.28	774,229.28	774,229.28	

PHA Name: Sprin	gfield Housing Authority	Grant Type and N Capital Fund Prog Replacement House	ram Grant No: <b>II</b>	Federal FY of Grant: 2001				
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No. Quantity		Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
200 N. 11th	Upgrade Public Restroom	1460		0.00	2,287.35	2,287.35	2,287.35	Complete
200 North 11 <sup>th</sup>	Madison Daycare	1460		0.00	0.00	0.00	0.00	Not complete
200 N. 11 <sup>th</sup>	Admin. Bathroom upgrade	1460		2,000.00	0.00	0.00	0.00	Moved to 1470
	GRAND Total 1460	1460		807,693.00	776,516.63	776,516.63	776,516.63	
PHA Wide	Refrigerator replacement	1465		0.00	26,282.50	26,282.50	26,282.50	Complete
PHA Wide	Stoves/Refrigerators	1465		29,500.00	31,345.00	31,345.00	31,345.00	Complete
	TOTAL 1465			29,500.00	57,627.50	57,627.50	57,627.50	
200 North 11 <sup>th</sup> ST	Administrative office bathroom upgrade	1470		0.00	0.00	0.00	0.00	Moved
IL 4-10	Utility Sheds	1470		0.00	2,888.00	2,888.00	2,888.00	Complete
	TOTAL 1470	1470		0.00	2,888.00	2,888.00	2,888.00	•
All hi-rises	Carpet shampooer	1475	5	0.00	6,144.00	6,144.00	6,144.00	Complete
PHA Wide	Truman Rd. Telephone Upgrade	1475		0.00	2,054.54	2,054.54	2,054.54	Complete
PHA Wide	Computer Hardware	1475		0.00	0.00	0.00	0.00	Moved to 1408
	TOTAL 1475	1475		0.00	8,198.54	8,198.54	8,198.54	
Bonansinga 4-31a	Relocation of residents	1495		23,500.00	10,928.80	10,928.80	10,9287.80	Complete
PHA Wide	Relocation	1495		0.00	2,600.00	2,600.00	2,600.00	Complete
	TOTAL 1495	1495		23,500.00	13,528.80	13,528.80	13,528.80	
PHA Wide	Contingency	1502		43,208.00	0.00	0.00	0.00	
	TOTAL 1502	1502		43,208.00	0.00	0.00	0.00	
	GRANT TOTAL			1,728,334.00	1,728,334.00	1,728,334.00	1,728.334.00	

PHA Name: Springfield Housing Authority  Grant Type and Number  Capital Fund Program No: IL06P004501-01						Federal FY of Grant: 2001	
	-						
Development Number Name/HA-Wide Activities		Fund Obligatenth Ending Da		g Factor No:  All Funds Expended (Month Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
1406 Operations	6-30-03		6-30-03	6-30-05		5-26-05	
1408 Management	6-30-03		6-30-03	6-30-05		5-26-05	
1410 Administration	6-30-03		6-30-03	6-30-05		5-26-05	
1460 Dwelling Structure	6-30-03		6-30-03	6-30-05		5-26-05	
1465 Dwelling Equipment	6-30-03		6-30-03	6-30-05		5-26-05	
1495 Relocation	6-30-03		6-30-03	6-30-05		5-26-05	
1502 Contingency	6-30-03		6-30-03	6-30-05		5-26-05	

# Annual Statement/Performance and Evaluation Report Comprehensive Grant Program (CGP) Part I: Summary

# U.S. Department of Housing and Urban Development Office of Public and Indian Housing

OMB Approval No. 2577-0157 (Exp. 7/31/98)

HA Name	Springfield Housing Authority			Comprehensiv	e Grant Number	FFY of Grant Approval
			IL06P00470	8-99 (RHFF)	1999	
Original An	nual Statement Reserve for Disaster/Emergencies Revised Annual Statement/ formance & Evaluation Report	Revision Number	Perform		n Report for Program Ye	ar Ending <u>6/30/03</u>
X I IIIdi I Ci	ionnance & Evaluation Report	Total F	stimated Co	ost	Tota	I Actual Cost (2)
Line No.	Summary by Development Account	Original		evised (1)	Obligated	Expended
1	Total Non-CGP Funds					
2	1406 Operations (May not exceed 10% of line 19) (Not Available)					
3	1408 Management Improvements					
4	1410 Administration					
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs					
8	1440 Site Acquisition					
9	1450 Site Improvement					
10	1460 Dwelling Structures					
11	1465.1 Dwelling Equipment - Nonexpendable					
12	1470 Nondwelling Structures					
13	1475 Nondwelling Equipment					
14	1485 Demolition					
15	1490 Replacement Reserve	382,022.00	382,022.0	00	382,022.00	382,022.00
16	1495.1 Relocation Costs					
17	1498 Mod Used for Development (Not Available)					
18	1502 Contingency (May not exceed 8% of line 19)					
19	Amount of Annual Grant (Sum of lines 2-18)	382,022.00	382,022.0	00	382,022.00	382,022.00
20	Amount of line 19 Related LBP Activities					
21	Amount of line 19 Related to Section 504 Compliance					
22	Amount of line 19 Related to Security					
23	Amount of line 19 Related to Energy Conservation Measures					
· ·	xecutive Director and Date	Signature of Public Housing Dir	ector/Office of	of Native American F	Programs Administrator and I	Date
X		X				

Page 1 of 3

Facsimile form HUD-52837 (10/96) Handbook 7485.3

<sup>1-</sup> To be completed for the Performance and evaluation report or a Revised Annual Statement 2- To be completed for the Performance and Evaluation Report.

## **U.S. Department of Housing** and Urban Development

Office of Public and Indian Housing

## IL06P004708-99 (RHFF) FINAL

Comprehensive Grant Program (CGP) **Part II: Supporting Pages** 

Annual Statement/Performance and Evaluation

**Total Estimated Cost Total Actual Cost** Development Status of Proposed Work (2) Number/Name General Description of Major Development Quantity Account Number Work Categories Funds **Funds** Original Revised (1) Obligated (2) Expended (2) Construction of Madison Park Place 1490 382,022.00 382,022.00 382,022.00 382,022.00 Complete Development

Signature of Executive Director and Date

Signature of Public Housing Director/Office of Native American Programs Administrator and Date

(1) To be completed for Performance and Evaluation Report or a Revised Annual Statement.

X

<sup>(2)</sup> To be completed for the Performance and Evaluation Report.

### U.S. Department of Housing and Urban Development Office of Public and Indian Housing

## IL06P004708-99 (RHFF) FINAL

Part III: Implementation Schedule

Development Number/Name	All Funds Obli	igated (Quarter Ending	g Date)	All Funds	Expended (Quarter E	nding Date)	Reasons for Revised Target Dates (2)
HA - Wide Activities	Original	Revised (1)	Actual (2)	Original	Revised (1)	Actual (2)	
1490 Replacement	09/30/01	09/30/01	09-30-01	09/30/3	09/30/03	06/27/02	
Reserves							
Signature of Execu	tive Director and Date			Signature of Public Ho	using Director/Office	of Native American Pr	ograms Administrator and Date
X				X			

<sup>(1)</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement

<sup>(2)</sup> To be completed for the Performance and Evaluation Report.  $2002 AS3\,$ 

# Annual Statement/Performance and Evaluation Report Comprehensive Grant Program (CGP) Part I: Summary

# U.S. Department of Housing and Urban Development Office of Public and Indian Housing

OMB Approval No. 2577-0157 (Exp. 7/31/98)

HA Name	Springfield Housing Authority			Comprehensiv	e Grant Number		rant Approval
				IL06R00450		1999	
Original An X Final Per	nual Statement Reserve for Disaster/Emergencies Revised Annual Statement formance & Evaluation Report	/Revision Number	Perform	nance & Evaluatio	n Report for Program Ye	ar Ending_	6/30/03
		Total Es	stimated Co	st	Tota	al Actual Co	st (2)
Line No.	Summary by Development Account	Original	Re	evised (1)	Obligated		Expended
1	Total Non-CGP Funds						
2	1406 Operations (May not exceed 10% of line 19) (Not Available)						
3	1408 Management Improvements						
4	1410 Administration						
5	1411 Audit						
6	1415 Liquidated Damages						
7	1430 Fees and Costs						
8	1440 Site Acquisition						
9	1450 Site Improvement						
10	1460 Dwelling Structures						
11	1465.1 Dwelling Equipment - Nonexpendable						
12	1470 Nondwelling Structures						
13	1475 Nondwelling Equipment						
14	1485 Demolition						
15	1490 Replacement Reserve	216,948.00	216,948.0	00	216,948.00	216	,948.00
16	1495.1 Relocation Costs						
17	1498 Mod Used for Development (Not Available)						
18	1502 Contingency (May not exceed 8% of line 19)						
19	Amount of Annual Grant (Sum of lines 218)	216,948.00	216,948.0	00	216,948.00	216	,948.00
20	Amount of line 19 Related LBP Activities						
21	Amount of line 19 Related to Section 504 Compliance						
22	Amount of line 19 Related to Security						
23	Amount of line 19 Related to Energy Conservation Measures						
	xecutive Director and Date	Signature of Public Housing Dir	ector/Office of	of Native American I	Programs Administrator and	Date	
1- To be comple	sted for the Performance and evaluation report or a Revised Annual Statement	X					

<sup>1-</sup> To be completed for the Performance and evaluation report or2- To be completed for the Performance and Evaluation Report.

## **U.S. Department of Housing** and Urban Development

Office of Public and Indian Housing

IL06R004501-99 FINAL

**Part II: Supporting Pages** 

Comprehensive Grant Program (CGP)

Annual Statement/Performance and Evaluation

Development Number/Name	General Description of Major	al Description of Major Development Quantity		Total E	stimated Cost	Total	Actual Cost	Status of Proposed Work (2)
	Work Categories	Account Number		Original	Revised (1)	Funds Obligated (2)	Funds Expended (2)	WOIK (2)
	Construction of Madison Park Place Development	1490		216,948.00	216,948.00	216,948.00	216,948.00	Complete

Signature of Executive Director and Date

Signature of Public Housing Director/Office of Native American Programs Administrator and Date

(1) To be completed for Performance and Evaluation Report or a Revised Annual Statement.

(2) To be completed for the Performance and Evaluation Report.

X

## U.S. Department of Housing and Urban Development Office of Public and Indian Housing

## IL06R004501-99 FINAL

Part III: Implementation Schedule

Development Number/Name	All Funds Obligated (Quarter Ending Date)			All Funds	Expended (Quarter E	Reasons for Revised Target Dates (2)	
HA - Wide Activities	Original	Revised (1)	Actual (2)	Original	Revised (1)	Actual (2)	
1490 Replacement Reserves	01-30-06	01-30-06	01-30-06	01-30-08	01-30-08	07-03-02	
Signature of Execu	itive Director and Date			Signature of Public Ho	using Director/Office	of Native AmericanPr	ograms Administrator and Date
X				X			

<sup>(1)</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement

<sup>(2)</sup> To be completed for the Performance and Evaluation Report. 2002 AS3

Ann	ual Statement/Performance and Eva	luation Report			
Cap	ital Fund Program and Capital Fund	l Program Repla	cement Housing Fa	ctor (CFP/CFPRHI	F) Part I: Summary
	Name: Springfield Housing Authority	Grant Type and Numbe Capital Fund Program G Replacement Housing Fa	Federal FY of Grant: 2001		
	iginal Annual Statement Reserve for Disasters/ E	mergencies Revised A	nnual Statement (revision	no: )	I
	formance and Evaluation Report for Period Ending			•	
Line	Summary by Development Account	Total	Estimated Cost	Tota	l Actual Cost
No.		Original	Revised	Obligated	Expended
1	Total non-CFP Funds	Original	Keviseu	Obligated	Expended
2	1406 Operations				
3	1408 Management Improvements				
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve	754,611.00	754,611.00	754,611.00	754,611.00
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collaterization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2–20)	754,611.00	754,611.00	754,611.00	754,611.00
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security - Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

PHA Name: <u><b>Sp</b></u>	ringfield Housing Authority	Capital Fund Pr	Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: IL06R 004501-01				Federal FY of Grant: 2001			
Development Number Name/HA- Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Act	Status of Work			
				Original 754,611.00	Revised 754,611.00	Funds Obligated	Funds Expended			
	Replacement Reserve – Major Byrd Redevelopment.	1490				754,611.00	754,611.00	Revised plan awaits approval by HUD to use balance of funds for Major Byrd Re-development.		

## **Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)** Part III: Implementation Schedule **Grant Type and Number Federal FY of Grant:** PHA Name: **Springfield Housing** Capital Fund Program No: **Authority** Replacement Housing Factor No: IL06R004501-01 2001 All Funds Expended Development Number All Fund Obligated Reasons for Revised Target Dates (Quarter Ending Date) (Quarter Ending Date) Name/HA-Wide Activities Original Revised Original Revised Actual Actual Replacement Reserve 02/27/06 02/27/08

Ann	ual Statement/Performance and Eva	luation Report									
Cap	ital Fund Program and Capital Fund	l Program Replac	cement Housing Fa	ctor (CFP/CFPRHF	) Part I: Summary						
	Name: Springfield Housing Authority	Grant Type and Number Capital Fund Program Gr Replacement Housing Fa	Federal FY of Grant: 2002								
☐ Original Annual Statement ☐ Reserve for Disasters/ Emergencies ☐ Revised Annual Statement (revision no: )											
	X Performance and Evaluation Report for Period Ending:X 06/30/06 Final Performance and Evaluation Report										
Line No.	Summary by Development Account	Total	Estimated Cost	Total	Actual Cost						
110.		Original	Revised	Obligated	Expended						
1	Total non-CFP Funds	Original	Revised	Obligateu	Lapended						
2	1406 Operations										
3	1408 Management Improvements										
4	1410 Administration										
5	1411 Audit										
6	1415 Liquidated Damages										
7	1430 Fees and Costs										
8	1440 Site Acquisition										
9	1450 Site Improvement										
10	1460 Dwelling Structures										
11	1465.1 Dwelling Equipment—Nonexpendable										
12	1470 Nondwelling Structures										
13	1475 Nondwelling Equipment										
14	1485 Demolition										
15	1490 Replacement Reserve	717,239.00	717,239.00	0.00	0.00						
16	1492 Moving to Work Demonstration										
17	1495.1 Relocation Costs										
18	1499 Development Activities										
19	1501 Collaterization or Debt Service										
20	1502 Contingency	<b>717 220 000</b>	717 220 00	0.00	0.00						
21	Amount of Annual Grant: (sum of lines 2–20)	717,239.000	717,239.00	0.00	0.00						
22	Amount of line 21 Related to LBP Activities  Amount of line 21 Related to Section 504										
23	Amount of line 21 Related to Section 504 compliance										
24	Amount of line 21 Related to Security – Soft Costs										
25	Amount of Line 21 Related to Security – Bort Costs  Amount of Line 21 Related to Security – Hard Costs										
26	Amount of line 21 Related to Security—Hard Costs  Amount of line 21 Related to Energy Conservation										
-	Measures										

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

PHA Name: <u><b>Sp</b></u>	ringfield Housing Authority	Grant Type and M Capital Fund Prog Replacement Hou	Number gram Grant No: sing Factor Grant N	o: IL06R0045	01-02	Federal FY of Grant: 2002		
Development Number Name/HA- Wide Activities  General Description of Major Work Categories		Dev. Acct No. Quantity		Total Estimated Cost		Total Ac	Status of Work	
				Original	Revised	Funds Obligated	Funds Expended	
	Replacement reserve – Major Byrd Redevelopment.	1490		717,239.00	717,239.00	0.00	0.00	Awaiting approval from HUD on revised plan.

## **Annual Statement/Performance and Evaluation Report** Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule **Grant Type and Number Federal FY of Grant:** PHA Name: **Springfield Housing** Capital Fund Program No: **Authority** 2002 Replacement Housing Factor No: IL06R004501-02 All Funds Expended Development Number All Fund Obligated Reasons for Revised Target Dates (Quarter Ending Date) (Quarter Ending Date) Name/HA-Wide Activities Original Revised Original Revised Actual Actual Replacement Reserve 02/27/06 02/27/08

#### **Annual Statement/Performance and Evaluation Report** Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary **Grant Type and Number** PHA Name: Springfield Housing Authority Federal FY of Grant: Capital Fund Program Grant No: 2003 Replacement Housing Factor Grant No: IL06R0045023 Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no: X Performance and Evaluation Report for Period Ending:06/30/06 Final Performance and Evaluation Report **Summary by Development Account** Line **Total Estimated Cost Total Actual Cost** No. **Original** Revised **Obligated Expended** Total non-CFP Funds 1406 Operations 1408 Management Improvements 1410 Administration 1411 Audit 1415 Liquidated Damages 1430 Fees and Costs 1440 Site Acquisition 1450 Site Improvement 10 1460 Dwelling Structures 11 1465.1 Dwelling Equipment—Nonexpendable 12 1470 Nondwelling Structures 1475 Nondwelling Equipment 13 14 1485 Demolition 15 1490 Replacement Reserve 643,611.00 643.611.00 0.00 0.00 16 1492 Moving to Work Demonstration 1495.1 Relocation Costs 17 1499 Development Activities 18 19 1501 Collaterization or Debt Service 1502 Contingency 20 Amount of Annual Grant: (sum of lines 2–20) 21 643,611.00 643,611.00 0.00 0.00 Amount of line 21 Related to LBP Activities 23 Amount of line 21 Related to Section 504 compliance 24 Amount of line 21 Related to Security – Soft Costs Amount of Line 21 Related to Security – Hard Costs Amount of line 21 Related to Energy Conservation Measures

Capital Fund Program and Capital<sup>2</sup>Fund Program Replacement Housing Factor (CFP/CFPRHF)

PHA Name: <b>Spri</b>	ngfield Housing Authority	Grant Type and Nun Capital Fund Program	n Grant No:		Federal FY of Gra	ant: 2003		
		Replacement Housing	g Factor Grant N	to: IL06R004502	203			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
	Replacement Reserve – Major Byrd Re-development	1490		643,611.00		0.00	0.00	Revised development plan await HUD approval.

## **Annual Statement/Performance and Evaluation Report** Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) **Part III: Implementation Schedule Grant Type and Number** Federal FY of Grant: 2003 PHA Name: Springfield Housing Authority Capital Fund Program No: Replacement Housing Factor No: IL06R00450203 All Funds Expended Development Number All Fund Obligated Reasons for Revised Target Dates Name/HA-Wide (Quarter Ending Date) (Quarter Ending Date) Activities Original Original Revised Actual Revised Actual 1420 Replacement 08/18/05 08/17/07 09/16/05 08/17/09 Reserve

#### **Annual Statement/Performance and Evaluation Report** Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary **Grant Type and Number** PHA Name: Springfield Housing Authority Federal FY of Grant: Capital Fund Program Grant No: 2004 Replacement Housing Factor Grant No: IL06R00450204 Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no: X Performance and Evaluation Report for Period Ending:06/30/06 Final Performance and Evaluation Report **Summary by Development Account** Line **Total Estimated Cost Total Actual Cost** No. **Original** Revised **Obligated** Expended Total non-CFP Funds 1406 Operations 1408 Management Improvements 1410 Administration 1411 Audit 1415 Liquidated Damages 1430 Fees and Costs 1440 Site Acquisition 1450 Site Improvement 10 1460 Dwelling Structures 11 1465.1 Dwelling Equipment—Nonexpendable 12 1470 Nondwelling Structures 1475 Nondwelling Equipment 13 14 1485 Demolition 15 1490 Replacement Reserve 753,143.00 753,143.00 0.00 0.00 16 1492 Moving to Work Demonstration 17 1495.1 Relocation Costs 1499 Development Activities 18 19 1501 Collaterization or Debt Service 1502 Contingency 20 Amount of Annual Grant: (sum of lines 2–20) 21 753,143.00 753,143.00 0.00 0.00 Amount of line 21 Related to LBP Activities 23 Amount of line 21 Related to Section 504 compliance 24 Amount of line 21 Related to Security – Soft Costs Amount of Line 21 Related to Security – Hard Costs Amount of line 21 Related to Energy Conservation Measures

Capital Fund Program and Capital<sup>2</sup>Fund Program Replacement Housing Factor (CFP/CFPRHF)

PHA Name: <b>Spri</b>	ngfield Housing Authority	Grant Type and Nur Capital Fund Program Replacement Housin	m Grant No:	Jo: <b>IL06R00450</b>	204	Federal FY of Grant: 2004			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Act	rual Cost	Status of Work	
				Original	Revised	Funds Obligated	Funds Expended		
	Replacement Reserve- Major Redevelopment	1490		753,143.00	753,143.00	0.00	0.00	Major Byrd redevelopment. Advertisement for marketing study and hiring A/E firm. Awaiting approval of revised plan from HUD Regional Office.	

<b>Annual Statemen</b>	t/Perform	ance and	Evaluatio	on Report								
Capital Fund Pro	Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)											
Part III: Implem	entation S	chedule										
PHA Name: Springfie	<u>Authority</u>		Program No:		_	Federal FY of Grant: 2004						
	_		Replacement	Housing Factor N	o: IL06R004502	204						
Development Number Name/HA-Wide Activities	l Fund Obliga arter Ending I			All Funds Expended Quarter Ending Date	Reasons for Revised Target Dates							
	Original	Revised	Actual	Original	Revised	Actual						
1420 Replacement Reserve	09/13/06	09/30/09		09/13/08	9/29/11		Per HUD Approval Letter dated 6/28/06					

Amount of line 21 Related to Energy Conservation Measures

#### **Annual Statement/Performance and Evaluation Report** Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary **Grant Type and Number** PHA Name: Springfield Housing Authority Federal FY of Grant: Capital Fund Program Grant No: 2005 Replacement Housing Factor Grant No: IL06R00450205 Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no: X Performance and Evaluation Report for Period Ending: 06/30/06 Final Performance and Evaluation Report **Summary by Development Account** Line **Total Estimated Cost Total Actual Cost** No. **Original** Revised **Obligated Expended** Total non-CFP Funds 1406 Operations 1408 Management Improvements 1410 Administration 1411 Audit 1415 Liquidated Damages 1430 Fees and Costs 1440 Site Acquisition 1450 Site Improvement 10 1460 Dwelling Structures 11 1465.1 Dwelling Equipment—Nonexpendable 12 1470 Nondwelling Structures 1475 Nondwelling Equipment 13 14 1485 Demolition 15 1490 Replacement Reserve 901.100.00 901.100.00 0.00 0.00 16 1492 Moving to Work Demonstration 1495.1 Relocation Costs 17 1499 Development Activities 18 19 1501 Collaterization or Debt Service 1502 Contingency 20 Amount of Annual Grant: (sum of lines 2–20) 21 901,100,00 901,100,00 0.00 0.00 Amount of line 21 Related to LBP Activities 23 Amount of line 21 Related to Section 504 compliance 24 Amount of line 21 Related to Security – Soft Costs Amount of Line 21 Related to Security – Hard Costs

Capital Fund Program and Capital<sup>2</sup>Fund Program Replacement Housing Factor (CFP/CFPRHF)

ngfield Housing Authority	Capital Fund Prograi	m Grant No:	Jo:IL06R00450	Federal FY of Grant: 2005			
General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
			Original	Revised	Funds Obligated	Funds Expended	
Replacement Reserve- Major Redevelopment	1490		901,100.00	901,100.00	0.00	0.00	Major Byrd redevelopment. Advertisement for marketing study and hiring A/E firm. Awaiting approval of revised plan from HUD Regional Office.
	General Description of Major Work Categories  Replacement Reserve- Major Re-	Capital Fund Program Replacement Housin General Description of Major Work Categories  Replacement Reserve- Major Re-  1490	Capital Fund Program Grant No: Replacement Housing Factor Grant N General Description of Major Work Categories  Replacement Reserve- Major Re-  1490	Capital Fund Program Grant No: Replacement Housing Factor Grant No: IL06R00450  General Description of Major Work Categories  Dev. Acct No. Quantity  Original  Replacement Reserve- Major Re-  1490  901,100.00	Capital Fund Program Grant No: Replacement Housing Factor Grant No: IL06R00450205  General Description of Major Work Categories  Dev. Acct No. Quantity Total Estimated Cost  Original Revised  Replacement Reserve- Major Re-  1490 901,100.00 901,100.00	Capital Fund Program Grant No: Replacement Housing Factor Grant No: IL06R00450205  General Description of Major Work Categories  Dev. Acct No. Quantity Total Estimated Cost Total Accordance Coriginal Revised Obligated Replacement Reserve- Major Re- 1490 901,100.00 901,100.00 0.00	Capital Fund Program Grant No: Replacement Housing Factor Grant No: Replacement Housing Factor Grant No: Replacement Housing Factor Grant No: Dev. Acct No. Quantity Total Estimated Cost  Original Revised Obligated Expended Replacement Reserve- Major Re- 1490 901,100.00 901,100.00 0.00

## **Annual Statement/Performance and Evaluation Report** Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) **Part III: Implementation Schedule Grant Type and Number** Federal FY of Grant: 2005 PHA Name: Springfield Housing Authority Capital Fund Program No: Replacement Housing Factor No: IL06R00450204 All Funds Expended Development Number All Fund Obligated Reasons for Revised Target Dates Name/HA-Wide (Quarter Ending Date) (Quarter Ending Date) Activities Original Original Revised Actual Revised Actual 1420 Replacement Per HUD approval letter dated 6/28/06 08/17/07 9/30/09 08/17/09 09/29/11 Reserve

# Springfield Housing Authority

# Section 8 Homeownership Program Capacity Statement

The Springfield Housing Authority has established a Section 8 tenant-based voucher homeownership option.

This option has been established to meet the mission of the Springfield Housing Authority to be the primary leader in providing quality, affordable housing to individuals and families, while encouraging partnerships necessary for residents to develop self sufficiency and to be productive members of the community.

The Springfield Housing Authority is committed to opening this program up to a minimum of ten (10) families each year, voucher availability permitting. Any Section 8 program participant who has been issued a Housing Choice Voucher may utilize the subsidy to purchase, rather than rent a home. The family is responsible for obtaining financing. The lender should be a federally regulated financial institution. Any other lenders must be specifically approved by the SHA. Eligible families are required to provide at least 3% of the home purchase price as a down payment. The family must use a minimum of \$1,000 for a down payment from their own funds. Elderly and disabled families are required to provide at least 3% of the home purchase price as a down payment and a minimum of \$500 must be from their own funds.

#### **Annual Statement/Performance and Evaluation Report** Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary **Grant Type and Number** PHA Name: Springfield Housing Authority Federal FY of Grant: Capital Fund Program Grant No: 2007 Replacement Housing Factor Grant No: IL06R00450207 Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no: X Performance and Evaluation Report for Period Ending:06/30/06 Final Performance and Evaluation Report **Summary by Development Account** Line **Total Estimated Cost Total Actual Cost** No. **Original** Revised **Obligated** Expended Total non-CFP Funds 1406 Operations 1408 Management Improvements 1410 Administration 1411 Audit 1415 Liquidated Damages 1430 Fees and Costs 1440 Site Acquisition 1450 Site Improvement 10 1460 Dwelling Structures 11 1465.1 Dwelling Equipment—Nonexpendable 12 1470 Nondwelling Structures 1475 Nondwelling Equipment 13 14 1485 Demolition 15 1490 Replacement Reserve 816,231.00 816,231.00 0.00 0.00 16 1492 Moving to Work Demonstration 17 1495.1 Relocation Costs 1499 Development Activities 18 19 1501 Collaterization or Debt Service 1502 Contingency 20 Amount of Annual Grant: (sum of lines 2–20) 21 816,231.00 816,231.00 0.00 0.00 Amount of line 21 Related to LBP Activities 23 Amount of line 21 Related to Section 504 compliance 24 Amount of line 21 Related to Security – Soft Costs Amount of Line 21 Related to Security – Hard Costs Amount of line 21 Related to Energy Conservation Measures

Capital Fund Program and Capital<sup>2</sup>Fund Program Replacement Housing Factor (CFP/CFPRHF)

PHA Name: <b>Spri</b>	ngfield Housing Authority	Grant Type and Nur Capital Fund Program Replacement Housin	n Grant No:	Jo: II .06R00450	Federal FY of Grant: 2007			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estim	Total Estimated Cost		tual Cost	Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
	Replacement Reserve- Major Redevelopment	1490		816,231.00	816,231.00	0.00	0.00	Major Byrd redevelopment. Advertisement for marketing study and hiring A/E firm. Awaiting approval of revised plan from HUD Regional Office.
							1	

Annual Statement/Performance and Evaluation Report											
<b>Capital Fund Pro</b>	Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)										
Part III: Impleme	entation S	chedule									
PHA Name: <b>Springfiel</b>	PHA Name: Springfield Housing Authority					Federal FY of Grant: 2007					
			Capital Fund Replacement		:IL06R004502	207					
Development Number	All	l Fund Obliga		A	Il Funds Expended	l	Reasons for Revised Target Dates				
Name/HA-Wide Activities	(Qua	arter Ending I	Date)	(Q	uarter Ending Date	e)					
	Original	Revised	Actual	Original	Revised	Actual					
1420 Replacement											
Reserve											

#### **Annual Statement/Performance and Evaluation Report** Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary **Grant Type and Number** PHA Name: Springfield Housing Authority Federal FY of Grant: Capital Fund Program Grant No: 2006 Replacement Housing Factor Grant No: IL06R00450206 – 2<sup>nd</sup> Increment Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no: XXPerformance and Evaluation Report for Period Ending:06/30/06 Final Performance and Evaluation Report **Summary by Development Account Total Estimated Cost Total Actual Cost** No. **Original** Revised Expended **Obligated** Total non-CFP Funds 1406 Operations 1408 Management Improvements 1410 Administration 1411 Audit 1415 Liquidated Damages 1430 Fees and Costs 1440 Site Acquisition 1450 Site Improvement 10 1460 Dwelling Structures 1465.1 Dwelling Equipment—Nonexpendable 11 12 1470 Nondwelling Structures 13 1475 Nondwelling Equipment 1485 Demolition 14 15 1490 Replacement Reserve 732,679.00 1492 Moving to Work Demonstration 16 17 1495.1 Relocation Costs 18 1499 Development Activities 1501 Collaterization or Debt Service 19 20 1502 Contingency 21 Amount of Annual Grant: (sum of lines 2–20) 732,679.00 22 Amount of line 21 Related to LBP Activities 23 Amount of line 21 Related to Section 504 compliance 24 Amount of line 21 Related to Security – Soft Costs Amount of Line 21 Related to Security- Hard Costs Amount of line 21 Related to Energy Conservation Measures

Capital Fund Program and Capital<sup>2</sup>Fund Program Replacement Housing Factor (CFP/CFPRHF)

PHA Name: <b>Spri</b>	ngfield Housing Authority	Grant Type and Capital Fund Prog Replacement Hou Increment	<b>Number</b> gram Grant No: Ising Factor Grant N	Federal FY of Grant: 2006				
Development Number Name/HA-Wide Activities			Quantity	Total Estin	mated Cost	Total Ac	Status of Work	
				Original	Revised	Funds Obligated	Funds Expended	
	Replacement Reserves - The Springfield Housing Authority is currently under contract with a firm to conduct a viability study on four of its five hi-rise locations to determine the feasibility of updating versus demolition.  Major Byrd Hi-rise is currently under demolition. A structural assessment has been completed on all hi-rise developments. Once all the studies have been completed and a cost assessment has been reviewed, a plan of action will be put in place based on the recommendations. Utilizing Replacement Housing Factor dollars will be utilized to offset demolition and new construction.			732,679.00				

Annual Statement/Performance and Evaluation Report									
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)									
Part III: Implementation Schedule									
PHA Name: <b>Springfiel</b>	d Housing A	<u> Authority</u>	Grant Type a Capital Fund				Federal FY of Grant: 2006		
					: IL06R0045010	$6-2^{\mathrm{nd}}$			
			Increment			_			
Development Number		Fund Obliga			ll Funds Expended		Reasons for Revised Target Dates		
Name/HA-Wide Activities	(Qua	arter Ending I	Oate)	(Q	uarter Ending Date	e)			
	Original	Revised	Actual	Original	Revised	Actual			
1490 Replacement Reserve	07/17/08			07/17/10					
L	l		<u> </u>	l		1	L		

Amount of line 21 Related to Energy Conservation Measures

#### **Annual Statement/Performance and Evaluation Report** Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary **Grant Type and Number** PHA Name: Springfield Housing Authority Federal FY of Grant: Capital Fund Program Grant No: 2006 Replacement Housing Factor Grant No: IL06R00450106 – 1st Increment Original Annual Statement Reserve for Disasters/ Emergencies Revised Annual Statement (revision no: XXPerformance and Evaluation Report for Period Ending: 06/30/06 Final Performance and Evaluation Report **Summary by Development Account Total Estimated Cost Total Actual Cost** Line No. Revised **Original Obligated** Expended Total non-CFP Funds 1406 Operations 1408 Management Improvements 1410 Administration 1411 Audit 1415 Liquidated Damages 1430 Fees and Costs 1440 Site Acquisition 1450 Site Improvement 10 1460 Dwelling Structures 1465.1 Dwelling Equipment—Nonexpendable 11 12 1470 Nondwelling Structures 13 1475 Nondwelling Equipment 1485 Demolition 14 15 1490 Replacement Reserve 1,870.00 1492 Moving to Work Demonstration 16 17 1495.1 Relocation Costs 18 1499 Development Activities 1501 Collaterization or Debt Service 19 20 1502 Contingency 21 Amount of Annual Grant: (sum of lines 2–20) 1,870.00 22 Amount of line 21 Related to LBP Activities 23 Amount of line 21 Related to Section 504 compliance 24 Amount of line 21 Related to Security – Soft Costs Amount of Line 21 Related to Security- Hard Costs

Capital Fund Program and Capital<sup>2</sup>Fund Program Replacement Housing Factor (CFP/CFPRHF)

PHA Name: <b>Spri</b>	ngfield Housing Authority	Grant Type and Capital Fund Prog Replacement Hou Increment	Number gram Grant No: ssing Factor Grant N	Federal FY of Grant: 2006				
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Ac	Status of Work	
				Original	Revised	Funds Obligated	Funds Expended	
	Replacement Reserves - The Springfield Housing Authority is currently under contract with a firm to conduct a viability study on four of its five hi-rise locations to determine the feasibility of updating versus demolition.  Major Byrd Hi-rise is currently under demolition. A structural assessment has been completed on all hi-rise developments. Once all the studies have been completed and a cost assessment has been reviewed, a plan of action will be put in place based on the recommendations. Utilizing Replacement Housing Factor dollars will be utilized to offset demolition and new construction.			1,870.00				
						1		

Annual Statement/Performance and Evaluation Report										
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)										
Part III: Implementation Schedule										
PHA Name: Springfiel	PHA Name: Springfield Housing Authority				o: <b>IL06R004501</b> 0	Federal FY of Grant: 2006				
			Increment							
Development Number Name/HA-Wide Activities		l Fund Obligat arter Ending D					Reasons for Revised Target Dates			
	Original	Revised	Actual	Original	Revised	Actual				
1490 Replacement Reserve	07/17/08			07/17/10						

## CARBON MONOXIDE ALARM DETECTOR ACT SPRINGFIELD HOUSING AUTHORITY COMPLIANCE STATEMENT

The Illinois State Legislative Act 094-0741 became effective on January 1, 2007. A copy of this Act is attached.

To comply with this Public Act, Springfield HousingAuthority researched different carbon monoxide detectors and received three competitive prices on said detectors to locate the best detector for the safety of our residents andthat was mostcost effective.

Springfield Housing Authority Staff recommended purchase of the Pro Tech 7030-SL Lithium Battery Powered Carbon Monoxide Detector with Secure Lock, which has a 5 year warranty on either the battery or the detector. At the end of November, Springfield Housing Authority ordered and purchased 1008 of these detectors from Allied Sales. Allied Sales was the lowest most responsible bidder for this carbon monoxide detector.

The Springfield Housing Authority received the shipment of all 1008 detectors in the beginning of December, 2006. Residents were provided a notice the Springfield Housing Authority's Maintenance personnel would be entering dwelling units to install the Carbon Monoxide Detectors, (notice attached), and also a statement of responsibility for the detector, (statement attached). The residents were informed of their responsibility for any damage to the detector as well as replace the batteries as necessary.

Springfield Housing Authority is pleased to state that 100% of its dwelling units had the carbon monoxide detectors installed prior to the January 1, 2007 deadline. It was hard work and commitment of Springfield Housing Authority Staff with theresidents' cooperation that made this possible.

# MINUTES OF MEETING RESIDENT MEETING-2007 Five Year Plan

Development: Bonansinga Hi-Rise Time: 2:00 PM

**Date:** October, 11, 2006

No Residents were present for this presentation.

Development: Hildebrand Hi-Rise Time: 10:00 AM

**Date:** October, 11, 2006

Linda Shanklin, Neighborhood Revitalization and Development Manager, opened the meeting by welcoming all the residents who were in attendance. Copies of the Five Year Plan were distributed to all residents that were there and copies were left forresidents who were unable to attend.

## Items that were discussed were:

- Replacing the upper hallways carpet.
- Completing the Air Conditioning installation.
- Completing the Renovation of the Entry Way.
- New Stoves/Refrigerators
- Window Washing
- Power Washing the Buildings.

## **Residents Comments:**

- The new A/C and Heat feels great.
- Apt. 502 refrigerator door handle is off.
- Apt. 703 has a hole in the freezer location of the refrigerator.
- Apt. 412 needs to be repainted.

Development: Sankey Hi-Rises 401-415 Time: 3:30 PM

**Date:** October, 11, 2006

Linda Shanklin, Neighborhood Revitalization and Development Manager, opened the meeting by welcoming all the residents who were in attendance. Copies of the Five Year Plan were distributed to all residents that were there and copies were left for residents who were unable to attend.

## Items that were discussed:

- Installation of A/C
- Re-Seal Parking Lot
- Stove/Refrigerators
- Window Washing
- Power Washing Buildings

#### **Resident Comments:**

- Do tenants have the right to decline the A/C unit?
  - o No it is not up to the tenant, the tenants rent will not increase.
- Communication between residents and SHA.
  - o It was suggested that the residents attend the month Board of Commissioners meetings to communicate their concerns.
- Water leakage problems, ever get fixed?
  - O SHA has had plenty of companies examine the water problem that keeps occurring at Sankey. If the building gets so bad that it will have to be condemned, will SHA help with placement of residents?
    - YES, just as SHA did with Major Byrd Hi-Rise placement of residents when that building was condemned.
- Outside awning was damaged by the Tornado, will it be fixed?
  - o This information will be given to Doug Warren, to file claim with the insurance company.

Development: Brandon Time: 5:00 PM

**Date: October, 11, 2006** 

No Residents were present for this presentation.

Development: 200 N. 11<sup>th</sup> Street Time: 5:00 PM

**Date:** October, 10, 2006

No Residents were present for this presentation.

# VIOLENCE AGAINST WOMEN AND DEPARTMENT OF JUSTICE REAUTHORIZATION ACT OF 2005, PUBLIC LAW 109162, AND THE UNITED STATES HOUSING ACT OF 1937, AS AMENDED: SPRINGFIELD HOUSING AUTHORITY PLAN OF ACTION

The plan of action to meet the Violence Against Women and Department of Justice Reauthorization Act of 2005, Public Law 109162, and the United States Housing Act of 1937, as amended, by the Springfield Housing Authority, is as follows:

• SHA will adopt a written policy to be inclusive of but not limited to protection from eviction from subsidized housing based upon the tenant's certification via form HUD 50066, (attached), that he/she is a victim of domestic violence, dating violence, sexual assault, or stalking.

No applicant or participant that is or has been a victim of domestic violence, dating violence, or stalking will be denied of program assistance or admission, if the applicant otherwise qualifies for admission.

Said policy will apply to both the conventional low-income public housing program and the Section 8 Voucher Program.